



**ACKNOWLEDGEMENT OF NOTIFICATION
OF HAZARDOUS WASTE ACTIVITY
(VERIFICATION)**

This is to acknowledge that you have filed a Notification of Hazardous Waste Activity for the installation located at the address shown in the box below to comply with Section 3010 of the Resource Conservation and Recovery Act (RCRA). Your EPA Identification Number for that installation appears in the box below. The EPA Identification Number must be included on all shipping manifests for transporting hazardous wastes; on all Annual Reports that generators of hazardous waste, and owners and operators of hazardous waste treatment, storage and disposal facilities must file with EPA; on all applications for a Federal Hazardous Waste Permit; and other hazardous waste management reports and documents required under Subtitle C of RCRA.

EPA I.D. NUMBER

+NY0080436615

INSTALLATION ADDRESS

DGS/BUREAU OF MOTORS VEHICLES
11 FRONT STREET
BROOKLYN NY 11201

11 FRONT STREET
BROOKLYN NY 11201

Please print or type with ELITE type (12 characters per inch) in the unshaded areas only

United States Environmental Protection Agency
Washington, DC 20460

Please refer to the Instructions for Filing Notification before completing this form. The information requested here is required by law (Section 3010 of the Resource Conservation and Recovery Act).



Notification of Hazardous Waste Activity

For Official Use Only

Comments

C
C

Installation's EPA ID Number

Approved

Date Received
(yr. mo. day)

047

Kings

C
F NYD080438815 T/A C 1

880407

I. Name of Installation

DGS/BUREAU OF MOTOR VEHICLES

II. Installation Mailing Address

Street or P.O. Box

C
3

11 FRONT STREET

State

ZIP Code

City or Town

NY 11201

C
4

BROOKLYN

III. Location of Installation

Street or Route Number

C
5

11 FRONT STREET

State

ZIP Code

City or Town

NY 11201

C
6

BROOKLYN

IV. Installation Contact

Name and Title (last, first, and job title)

Phone Number (area code and number)

C
2

COX, R. E., ACT. DIR. 718 643 2018

V. Ownership

A. Name of Installation's Legal Owner

B. Type of Ownership (enter code)

C
R

CITY OF NEW YORK

M=MUNICIPAL

VI. Type of Regulated Waste Activity (Mark 'X' in the appropriate boxes. Refer to instructions.)

A. Hazardous Waste Activity

- ☒ 1a. Generator ☐ 1b. Less than 1,000 kg/mo.
☐ 2. Transporter
☐ 3. Treater/Storer/Disposer
☐ 4. Underground Injection
☐ 5. Market or Burn Hazardous Waste Fuel (enter 'X' and mark appropriate boxes below)
☐ a. Generator Marketing to Burner
☐ b. Other Marketer
☐ c. Burner

B. Used Oil Fuel Activities

- ☐ 6. Off-Specification Used Oil Fuel (enter 'X' and mark appropriate boxes below)
☐ a. Generator Marketing to Burner
☐ b. Other Marketer
☐ c. Burner
☐ 7. Specification Used Oil Fuel Marketer (or On site Burner) Who First Claims the Oil Meets the Specification

VII. Waste Fuel Burning: Type of Combustion Device (enter 'X' in all appropriate boxes to indicate type of combustion device(s) in which hazardous waste fuel or off-specification used oil fuel is burned. See instructions for definitions of combustion devices.)

☐ A. Utility Boiler

☐ B. Industrial Boiler

☐ C. Industrial Furnace

VIII. Mode of Transportation (transporters only — enter 'X' in the appropriate box(es))

- ☐ A. Air ☐ B. Rail ☒ C. Highway ☐ D. Water ☐ E. Other (specify)

IX. First or Subsequent Notification

Mark 'X' in the appropriate box to indicate whether this is your installation's first notification of hazardous waste activity or a subsequent notification. If this is not your first notification, enter your installation's EPA ID Number in the space provided below.

- ☒ A. First Notification ☐ B. Subsequent Notification (complete item C)

C. Installation's EPA ID Number

Continue on reverse

ID — For Official Use Only													
C												T/A	C
W													1

X. Description of Hazardous Wastes (continued from front)

A. Hazardous Wastes from Nonspecific Sources. Enter the four-digit number from 40 CFR Part 261.31 for each listed hazardous waste from nonspecific sources your installation handles. Use additional sheets if necessary.

1 D 0 0 1	2	3	4	5	6
7	8	9	10	11	12

B. Hazardous Wastes from Specific Sources. Enter the four-digit number from 40 CFR Part 261.32 for each listed hazardous waste from specific sources your installation handles. Use additional sheets if necessary.

13	14	15	16	17	18
19	20	21	22	23	24
25	26	27	28	29	30

C. Commercial Chemical Product Hazardous Wastes. Enter the four-digit number from 40 CFR Part 261.33 for each chemical substance your installation handles which may be a hazardous waste. Use additional sheets if necessary.

31	32	33	34	35	36
37	38	39	40	41	42
43	44	45	46	47	48

D. Listed Infectious Wastes. Enter the four-digit number from 40 CFR Part 261.34 for each hazardous waste from hospitals, veterinary hospitals, or medical and research laboratories your installation handles. Use additional sheets if necessary.

49	50	51	52	53	54
----	----	----	----	----	----

E. Characteristics of Nonlisted Hazardous Wastes. Mark 'X' in the boxes corresponding to the characteristics of nonlisted hazardous wastes your installation handles. (See 40 CFR Parts 261.21 — 261.24)

☒ 1. Ignitable
(D001)

☐ 2. Corrosive
(D002)

☐ 3. Reactive
(D003)

☐ 4. Toxic
(D000)

XI. Certification

I certify under penalty of law that I have personally examined and am familiar with the information submitted in this and all attached documents, and that based on my inquiry of those individuals immediately responsible for obtaining the information, I believe that the submitted information is true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment.

Signature 

Name and Official Title (type or print)
Robert E. Cox
Director, Bureau Motor Vehicles

Date Signed
4/6/88

PERMITS ADMINISTRATION
1988 APR - 7 AM 11:31
NEW YORK, NY
AGENCY, REGION II
ENVIRONMENTAL PROTECTION



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EPA I.D. NUMBER

+ NYD080450015

INSTALLATION ADDRESS

DGS/BUREAU OF MOTOR VEHICLES
11 FRONT STREET
BROOKLYN NY 11201

11 FRONT STREET
BROOKLYN NY 11201



RCRIS NOTIFICATION DATA DISCREPANCY FORM

Information from RCRIS

Facility Name: NYC DEPT. OF GENERAL SERVICES
Facility EPA ID Number: NYD 080 438 815
Facility Address: _____
City: _____ St: _____ Zip: _____
Mailing Address: _____
City: _____ St: _____ Zip: _____
Facility Contact: _____ Phone: - -
Owner/Operator: _____
SIC Code(s): _____
Waste Codes: _____
Generator Status (LQG/SQG) _____
Other: _____

New Information (make change to "E" record only)

Facility Name: _____
Facility EPA ID Number: _____
Facility Address: _____
City: _____ St: _____ Zip: _____
Mailing Address: _____
City: _____ St: _____ Zip: _____
Facility Contact: _____ Phone: - -
Owner/Operator: _____
SIC Code(s): _____
Waste Codes: _____
Generator Status (LQG/SQG) _____
Other: _____

In response to this request, please modify RCRIS Handler Notification Data for the following:
General Generator Information:

Facility Name	EPA ID Number
Facility Address	Mailing Address
Facility Contact	Phone
SIC Code(s)	Waste Code(s)
Other	

Add/Change Generator Status Codes:

C	#
	1
	2
	3
	4
	5

conditionally exempt Small Quantity Generator
Definitionally Excluded Wastes
Delisted Wastes
One-time Hazardous Waste Generator
Periodic Hazardous Waste Generator

C	#
	6
	7
	8
	9
	1
	0

No longer Generates HW; Still in Business
No longer Generates HW; Out of Business
Never Generated Hazardous Waste
ID Number to Transport Non-Hazardous Waste
Regulated Under Another ID Number(s) (list below)

Contact: JOHN GORMAN Phone: X-2621
Effective Date of Change: 10/26/93

John Gorman
John Gorman, Chief, NYCS

7/30/94
Date

Gen = 11 IN 6-99
8-1-94



INSPECTION FORM

Region:
LAND BASED TSDF
COMMERCIAL TSDF
OTHER TSDF
GENERATOR
OTHER

NEW YORK STATE INDUSTRIAL HAZARDOUS WASTE MANAGEMENT ACT
(Chapter 639, Laws of 1978)

Prepared for:

Commissioner
NEW YORK STATE DEPARTMENT OF ENVIRONMENTAL CONSERVATION

Send to: Division of Hazardous Substances Regulation
Compliance Inspection Section
50 Wolf Road - Room 208
Albany, New York 12233-7252

EPA I.D. NUMBER: NY 0080438815

COMPANY NAME (Corporate): MTC Dept of General Services

(Division): _____

COMPANY MAILING ADDRESS: 11 Front St.

City & State

Brooklyn, NY Zip Code 11201

COMPANY LOCATION ADDRESS: _____

(if different than mailing) _____

City & State _____, NY Zip Code _____

COMPANY TELEPHONE NUMBER: (718) 643-2016 Extension _____

FULL NAME OF COMPANY CONTACT: (Mr.) (Ms.) Jim Brown

TITLE OF COMPANY CONTACT: Supervisor of Auto Mechanics

INSPECTION DATE: 10/26/93 TIME OF INSPECTION: 4³⁰ (a.m.) 1⁴⁵ (p.m.)

INSPECTOR'S NAME: Michael Scudese

TITLE: _____

NAME: _____

TITLE: _____

REPORT PREPARED BY: M Scudese

DATE: 10/27/93

REPORT APPROVED BY: _____

DATE: _____

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PART I

General Information and Classification of Facility

1. Identification of Hazardous Waste - 371

Yes No

A. Facility generates and/or stores hazardous waste on-site. X

(1) Company filed a RCRA hazardous waste notification and/or Part A of RCRA permit application.

(2) Company has used knowledge of the hazardous characteristic of the waste to determine if it is hazardous.

(3) Testing has shown characteristics of:

- () Ignitability (D001) - 371.3(b)
- () Corrosivity (D002) - 371.3(c)
- () Reactivity (D003) - 371.3(d)
- () EP Toxicity (D004 - 017) - 371.3(e)

(4) The material is listed in the regulations as a hazardous waste from non-specific sources (F-Waste). 371.4(b).

(5) The waste is listed in the regulations as a hazardous waste from specific sources (K-Waste). 371.4(c).

(6) The material is listed in the regulations as an acute hazardous waste (P-Waste). 371.4(d)(5).

(7) The material or product is listed in the regulations as a discarded commercial chemical product, off-specification species or manufacturing chemical intermediate (U-Waste). 371.4(d)(6).

(8) The material is listed in the regulations as a waste containing PCBs. 371.4(e).

B. Is there reason, other than those above, for you to believe that there is hazardous waste on site? (Explain) No

3/92

C. The handler notified EPA as a:

Large Quantity Generator

Has EPA or DEC officially modified the handlers status? If so, attach correspondence.

No

D. If the facility is a treatment, storage or disposal facility, have they:

NA Submitted a Part A application.

 Should the Part A be modified by the Company? If so, explain.

 Been granted a Part B permit.*

 Submitted a Part 373 permit application.

 Been granted a Part 373 permit or operating under SAPA with a Part 360 permit.*

If so, when does it expire: _____

*Complete Appendix M - indicate compliance status with permit conditions.

2. Exemptions

A. Generator Exemptions

(1) X Not a regulated handler.

(2) Samples collected for testing. 372.1(e)(5).

(3) Residues of hazardous waste in empty containers.
372.1(e)(6).

(4) A hazardous waste which is generated in a product or raw material storage tank, a product or raw material transport vehicle or vessel, a product or raw material pipeline, or in a manufacturing process unit or an associated non-waste treatment manufacturing unit is not

subject to regulation until it exits the unit in which it was generated, unless the unit is a surface impoundment, or unless the hazardous waste remains in the unit more than 90 days after the unit ceases to be operated for manufacturing, or for storage or transportation of product or raw materials. 372.1(e)(7).

B. TSD Exemptions

1. TSD exemptions

(a) — Recycling of Hazardous Wastes: 373-1.1(d)(1)(viii). Parts 373-2.2(c), 372.4(b), 372.4(d)(1) must be complied with (Storage of wastes prior to recycling is not exempt under this subparagraph.) In addition:

- This exemption does not apply to commercial facilities which recycle listed hazardous wastes or hazardous waste sludges received from off-site or burn these wastes for energy recovery;
- Commercial facilities that reclaim precious metals from hazardous wastes do qualify;
- This exemption does not apply to boiler and industrial furnaces that burn hazardous wastes for energy recovery if the waste stream has a heat value of less than 8,000 BTU/lb.
- Mobile or transportable commercial facilities which operate on the generator's site, if a containment area which meets the requirements of subdivision 373-2.9(f) is provided for the reclaiming facility and any associated temporary container holding or storage area.

(b) — The storage of the following hazardous wastes is exempt from permitting provided that Part 374 of this Title is complied with: 373-1.1(d)(1)(vii).

- hazardous wastes that are recycled in a manner constituting disposal;
- hazardous waste burned for energy recovery in boilers and industrial furnaces that are not regulated under section 373-2.15 or 373-3.15 of this Part. This exemption is not available if the hazardous waste stream has individual hazardous waste components with little or no heat value (less than 8,000 BTU/lb);

- hazardous waste from which precious metals (as defined in section 374.6 of this Title) are being reclaimed; and
 - spent lead acid batteries that are being reclaimed by battery crackers or secondary lead smelters.
- (c) — Totally enclosed treatment facility - 373-1.1(d)(1)(xi).
- (d) — Elementary neutralization units or wastewater treatment units other than units located at commercial facilities. Units utilized only to neutralize or treat hazardous waste from recycling characteristic hazardous wastes or for precious metal recovery at commercial facilities are exempt. 373-1.1(d)(1)(xii) (Complete Appendix Q).
- (e) — Storage of hazardous waste generated and stored on-site for 90 days or less and 8,800 gallons or less is stored in containers or 20,000 gallons or less is stored in tanks. 373-1.1(d)(1)(iii).
- (f) — Storage of liquid hazardous waste over the designated sole source aquifers provided the waste is stored less than 90 days and 8,800 gallons or less is stored in containers or 20,000 gallons or less is stored in tanks. 373-1.1(d)(1)(iv).
- (g) — The on-site treatment of hazardous waste, by the generator, in the same tanks or containers used for accumulation and storage is exempt provided the generator complies with 6NYCRR Part 373-1.1(d)(1)(iii) and (iv). 373-1.1(d)(1)(ix).
- (h) — Storage and treatment of hazardous waste on-site of generation if generates less than 100 kilograms and stores less than 1,000 kilograms of hazardous waste in each calendar month and not generate or store acute hazardous waste as described in 373-1.1(d)(1)(b). 373-1.1(d)(1)(v).
- (i) — Accumulation areas. Complete Part II: 3A. 373-1.1(d)(1)(xiv).
- (j) — Storage of manifested shipments of hazardous waste in containers or vehicles by a transporter at its own transfer facility for 5 days or less. Complete Appendix B. 373-1.1(d)(1)(xv).

3. Hazardous Waste Special Assessment Fees - Article 27-0923 ECL

Is the company aware that a Quarterly Hazardous Waste Special Assessment Return (Form TP 550) is required for any quarter in which hazardous waste is generated and disposed of in any quantity and method that would produce an assessment of at least \$27 for that quarter?*

Yes ☐ No ☐

* The review of Form TP 550 or the failure to submit a form when required will be the subject of a separate action by the Department.

4. Status Identification:

A. ☐ Transporter - complete Appendix B

B. Generator Status Identification

1. ☐ Category 1 - Conditionally Exempt Generator - generates less than 100 kg/mo and stores less than 100 kg. - 372.1(e)(1)(vii)(a) Complete Part II, 1A.
2. ☐ Category 2 - Small Quantity Generator - generates less than 100 kg/mo and stores more than 100 kg but less than 1,000 kg. - 372.2(a)(8)(vi) - Complete Part II, 1B.
3. ☐ Category 3 - Generator Subject to Reduced Requirements - generates more than 100 kg/mo but less than 1,000 kg/mo and stores less than 1,000 kg. - 372.2(a)(8)(iii) - Complete Part II, 1C.
4. ☐ Category 4 - Generator - generates and/or stores 1,000 kilograms or more per month or generates acute hazardous waste in quantities greater than 1 kg per month. Complete Part II, Questions 2-7. (Generators over sole source aquifers also complete Appendix A.)

C. Treatment, Storage or Disposal Facility Status

1. Hazardous waste is generated and stored on-site. If so:
 - (a) ☐ Is hazardous waste stored on-site longer than 90 days? 373-1.1(d)(1)(iii) - If yes, complete Appendix A.*
 - (b) ☐ Is more than 8,800 gallons of hazardous waste stored in containers? 373-1.1(d)(1)(iii)(a) - If yes, complete Appendix A.*

- (c) — Is more than 20,000 gallons of hazardous waste stored in tanks? 373-1.1(d)(1)(iii)(b) - If yes, complete Appendix A.*

* (Note: Do not complete Appendix A for generators only that have exceeded 90 days or quantity limits.)

2. — Hazardous waste is received from off-site and not beneficially used, reused or legitimately recycled or stored. If yes, complete Appendix A.
3. — Hazardous waste is treated on-site. If yes, complete appropriate portion of this report.
4. — Hazardous waste is disposed of on-site. If yes, complete appropriate portion of this report.

D. Hazardous Waste Generation/Storage

1. Describe the activities that result in the generation of hazardous waste. Include manufacturing processes that generate hazardous waste.

The facility ⁴⁵ is engaged in the maintenance of automobiles for the City of New York. Exempt hazardous waste is generated as waste antifreeze, generated from the changing of antifreeze during automobile maintenance. The waste antifreeze is exempt from consideration as a hazardous waste because it is beneficially reused, being sold to another facility which uses it as a substitute for antifreeze product. Also generated is solid waste - parts washer, which is non-hazardous because it has a flash point of 143°F (not ignitable) and waste oil which is non-hazardous in NY.

2. Identify the hazardous wastes that are on-site, the quantity of each, the storage method, the type and size container or tanks used and the location in the storage area. (Be as specific as possible.)

Accumulation Areas:

None

Container Storage Areas for Cat. 1-4 generators*

None

Interim Status/Permitted Storage Areas for containers:

NA

Tank Storage Areas for Cat. 1-4 generators*

NA

Interim Status/Permitted Storage Areas for tanks:

NA

-
-
-
-
- * Cat. 1 and 2 generator - unlimited storage time providing quantity limits not exceeded.
 - Cat. 3 generator - 180 days (or 270 if TSD is over 200 miles away).
 - Cat. 4 generator - 90 days or less storage time.

NOT FOR RELEASE TO COMPANY, PROTECTED INFORMATION

PART III

Comments, Conclusions and Recommendations Section

Facility Name NYD Dept of General Services
EPA I.D. No. NYD 080438815
Date of Inspection 10/26/93

General Comments and Conclusions (cite appropriate State regulations in violation and attach additional sheets and other information as required)

None

3/92

NOT FOR RELEASE TO COMPANY, PROTECTED INFORMATION

Recommendations EPA I.D. No. _____

___ No violations found. Thank you letter should be issued.

___ A warning letter should be issued.

___ A strong warning letter should be issued.

___ A complaint should be issued and a fine levied.

___ Other (please explain)*

___ Sample(s) have been taken.

Comments on sample results: _____

*Do not refer cases directly to the BECI unit. All BECI referrals
will be made by the Central Office.

HANDLER NAME NYC Dept of General Services
EPA ID# NY D 0 8 0 4 3 8 8 1 5

APPENDIX R
LAND DISPOSAL RESTRICTIONS CHECKLIST

I. Applicability⁵

- A. Unless otherwise specified, the following requirements apply to all persons who generate, transport, treat, store or dispose of hazardous waste (except conditionally exempt generators of less than 100 kg of non-acute or 1 kg of acute hazardous waste per calendar month).
- B. The hazardous wastes restricted from land disposal are:
1. The hazardous wastes listed or identified in Part 371 or 376.
 2. The wastes identified as hazardous based on characteristic alone (D001-D017).

II. Waste Identification⁵

- A. Determine which of the following prohibited* LDR waste categories the facility manages:

	<u>Generate</u>	<u>Transport</u>	<u>Treat</u>	<u>Store</u>	<u>Dispose</u>
F001-F005 Solvents	_____	_____	_____	_____	_____
F020-F023 and F026-F028 Dioxins	_____	_____	_____	_____	_____
Wastes found in 376.3(b)(1)**	_____	_____	_____	_____	_____
Wastes found in 376.3(c)***	_____	_____	_____	_____	_____

* These wastes are prohibited from land disposal unless the wastes meet or have been treated to meet the treatment standards of 376.4, have been granted an exemption by petition, have been granted an extension, or have been treated to meet alternative treatment standards.

** Liquid hazardous wastes containing PCBs at concentrations greater than or equal to 50 ppm, hazardous wastes containing HOCs in concentrations greater than or equal to 1,000 ppm, that are identified as hazardous by a property that does not involve HOCs, and liquid wastes that are hazardous and also contain over 134 mg/l nickel and/or 130 mg/l of thallium.

*** Formerly the First, Second and Third Thirds

NOTE: Superscript numbers indicate general applicability of sections.

1. Generator 2. Treatment Facility 3. Storage Facility
4. Land Disposal Facility 5. All

only cover sheet submitted as no, hazardous waste generated so checklist not applicable

B. Waste Specific Prohibitions*. (Formerly National Capacity Variances)

* Case-by-case extensions may be granted to individual facilities for these wastes after expiration of capacity variances.

Does the facility handle the following wastes? YES NO

1. Soil and debris contaminated with wastes that had treatment standards set in the Third Third rule based on incineration, mercury retorting, or vitrification. (expires-05/08/92) - 376.3(c)(4). ___ ___
2. The following nonwastewaters-F039,K031,K084,K101,K102, K106,P010,P011,P012,P036,P038,P065,P087,P092,U136,U151. (expires-05/08/92) - 376.3(c)(2). ___ ___
3. The following wastes identified as hazardous based on a characteristic alone: D004 (nonwastewaters), D008 (lead materials stored before secondary smelting), D009 (nonwastewaters) (expires 05/08/92) - 376.3(c)(2). ___ ___
4. Inorganic solid debris*; includes chromium refractory bricks carrying EPA Hazardous Waste Nos. K048-K052 (expires-05/08/92) - 376.3(c)(2). ___ ___

* Inorganic Solid Debris means nonfriable inorganic solids contaminated with D004-D011 hazardous wastes that are incapable of passing through a 9.5 mm standard sieve; and that require cutting, or crushing and grinding in mechanical sizing equipment prior to stabilization, and are limited to metal slags (either dross or scoria); glassified slag; glass; concrete; masonry and refractory bricks; metal cans, containers, drums or tanks; metal nuts, bolts, pipes, pumps, valves, appliances or industrial equipment; and scrap metal as defined in 370.2(c).

5. RCRA hazardous wastes that contain naturally occurring radioactive materials (expires-05/08/92) - 376.3(c)(2). ___ ___
6. Wastes that are mixed radioactive/hazardous wastes, and soil or debris contaminated with mixed radioactive/hazardous wastes (expires-05/08/92) - 376.3(c)(3). ___ ___

If yes to any of 1 through 6 above, identify the waste(s).

**GENERAL INSTRUCTION
FOR WASTE MINIMIZATION CHECKLIST**

I. Legislation and Authority

A. The EPA is given the authority by Congress through the Hazardous and Solid Waste Amendments of 1984 (HSWA) to protect the environment by "minimizing the generation of hazardous waste and the land disposal of hazardous waste by encouraging process substitution, material recovery, properly conducted recycling and reuse, and treatment;" (HSWA, sec.1003(a) (6)). Through this and other legislative actions, Congress has made clear it's intention that the reduction of hazardous waste is far more desirable than the safe disposal of hazardous waste.

B. HSWA sets forth two basic requirements for generators and treatment, storage and disposal facilities (TSDFs). They are:

1. that hazardous waste generators submit waste minimization reports as part of the biennial reports (3002 (a)(6),

2. that generators certify on the manifest that they have a waste reduction program in place (3005 (h))

II. Pre-inspection procedures:

Review any company documents regarding waste minimization activities conducted by the handlers to be inspected. (PAB files/ permit files if TSD). This should include records of the annual reports (AR) submitted to the states, or the biennial reports submitted to EPA. The AR/BER contain a description of the efforts taken during the year to reduce the toxicity and volume of waste generated, as well as the actual reductions achieved.

Waste Minimization Checklist

GENERATOR CHECKLIST

=====

MANIFEST

GENERAL 262.20

YES NO N/A

Does the generator, offer for transportation, hazardous waste for off-site treatment/disposal? If yes, proceed to next question. If no, proceed to 264.75/265.75.

___ X ___

262.23

Does the generator sign the manifest certification which states;

___ ___ X

" If I am a large quantity generator, I have a program in place to reduce the volume and toxicity of the waste generated to the degree I have determined to be economically practical and that I have selected the practical method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the enviroment; OR, if Iam a small quantity generator, I have made a good effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford."

Does the generator have a written Waste Minimization Plan?

___ ___ X

If no, ask the generator to describe his plan orally.

NA

COMMENTS:

(Explain in this space the areas that visually show evidence that a program is in place and is being implemented.)

ANNUAL /BIENNIAL REPORT

262.41

YES NO N/A

Has the generator submitted Annual (AR)
or Biennial reports (BER) to the
appropriate regulatory agency?

— — —X

The inspector should review these reports prior to the inspection (see above), and should try to verify the information in the report during his/her site inspection. The following questions should be addressed during the inspection.

262.56 (5)

Does the BER or AR include the efforts
undertaken during the year to reduce
the volume of toxicity of the wastes
generated?

— — —X

Does the BER or AR include a description of
the changes in volume and toxicity of
the wastes actually achieved during the
year in comparison to previous years?

— — —X

Do these efforts match the information
contained in the generator's written
or verbally described waste minimization
program.

--- --- ---X

Is the BER or AR certification signed by
the generator or authorized
representatives?

— — —X

TSDF CHECKLIST

The inspector should review a copy of the AR/BER prior to the inspection, and should try to verify the information in the report during his inspection. The following question should be addressed during the inspection.

	YES	NO	N/A
Does the AR/BER include the efforts undertaken during the year to reduce the volume of toxicity of the waste generated?	---	---	X---
Does the AR/BER include a description of the changes in volume and toxicity of the wastes actually achieved during the year in comparison to previous years?	---	---	X---
Do these efforts match the information contained in the generator's written or verbally described waste minimization program.			
Is the AR/BER certification signed by the generator or authorized representatives?	---	---	X---
264.75/265/75 (h-j)			
Does the generator treat, store and dispose hazardous waste on site?	---	X---	---
If yes to the above question, does the generator submit BERs or ARs to the appropriate regulatory agency?	---	---	X---

INSPECTOR'S MULTI-MEDIA CHECKLIST

Facility Name: NYC Dept of General Services
Facility Address: 11 Front St.
Brooklyn, NY 11201

Facility ID No.: NYD 080 438815
Inspector's Name: Michael Scudese
Inspector's Phone: (908) 563-1100 Division/Branch: TRC
Date of Inspection: 10/26/93

INSPECTORS' MULTI-MEDIA CHECKLIST

GENERAL VISUAL CUES OF POSSIBLE NONCOMPLIANCE WARRANTING FURTHER INQUIRY

1. Sloppy housekeeping or poor maintenance in work and storage areas or laboratories.
2. Stains or discoloration of soil, concrete, or floors in work areas.
3. Distressed vegetation - unhealthy, discolored, or dead.
4. Dark smoke or dust clouds, or smoke coming from other than a smoke stack.
5. Unusual odors or strong chemical smells.
6. Sheen on surface waters.

CHECK IT OUT!

1. If you see or hear something suspicious during an inspection, check it out! Ask probing questions:
 - What is it? Is it a waste product?
 - What process produced it?
 - Has it been tested?
 - Where do you normally dispose of it?
 - Do you have a permit for the disposal?
 - How long has the circumstance existed?
 - When did it begin?
2. Pay attention to the situation.
 - Note amount of pollutant that appears to be involved.
 - Note the location.
 - Take notes describing the situation, noting the source of the pollutant and its emission point.
 - Take photographs.

PROGRAM-SPECIFIC QUESTIONS

Refer to program-specific questions in Attachment A appropriate for the facility you are inspecting.

REPORTING POSSIBLE NONCOMPLIANCE

Throughout this checklist, there are YES/NO questions. If you place an answer in a field marked with an asterisk (*), this means you should promptly refer the matter to the appropriate Region II program office. After you return from your inspection, immediately let your supervisor know that you observed possible noncompliance in another program area during your inspection. The information should then be referred to the appropriate Section Chief listed on Attachment B.

UNDERGROUND STORAGE TANKS (UST)

Ask:

1. Does the facility have regulated USTs? ___ YES ☒ NO

[A regulated UST has more than 10% of tank volume, including piping, located underground; and contains petroleum products or hazardous substances (as defined under CERCLA). Note: USTs containing fuel oil for on-site heating are exempt from UST requirements.]

If YES, ask:

2. Are the USTs registered with the State? ___ YES ___ NO*
3. What kind of petroleum product or hazardous substance does UST contain? _____
4. Is there any evidence of UST leakage/spillage? ___ YES* ___ NO
5. When was the UST installed? _____
6. All USTs must have leak detection according to the following schedule:

<u>Installation Date</u>	<u>Leak Detection By December of--</u>
Before 1965 or unknown	1989
1965 - 1969	1990
1970 - 1974	1991
1975 - 1979	1992
1980 - Dec. 1988	1993

All USTs installed after December 1988 must currently be equipped with leak detection.

Leak detection systems include monitoring wells (water or vapor), automatic tank gauging system, interstitial monitoring, manual tank gauging or inventory control plus tank tightness testing.

7. Is some form of leak detection in use for every UST required (based on above schedule) to have it? ___ YES ___ NO*
8. Are required records available on-site (e.g., documenting registration and leak detection)? ___ YES ___ NO*

REFER to program office if you check an answer marked with *.

AIR **Stationary Source Compliance**

1. With sun BEHIND you, observe: Is opaque smoke being emitted from a smokestack, vent or opening? ___YES* ☒ NO

 ["Opaque smoke" is smoke -- not steam -- dark enough to obscure anything behind the plume for five minutes or more. (Steam dissipates at a given point; smoke trails off.) The sun (if not obscured by clouds) should be in a 140° arc behind the observer. Please note whether sun was obscured; if sun was not obscured, note the relative positions of the sun, the observer and the emission point observed.]
2. If YES, ask:
 - A. Which process or process line is smoke coming from? (Try to be specific, e.g., "Boiler No. 4" or "Coating Line C").

 - B. What is the cause of the smoke emission? E.g.--
 - i. Is any air pollution control equipment out of service or turned off while production is ongoing? ___YES ___NO
 - ii. If YES: When will it be back on line? _____
 - iii. Is the facility operating under an unusual load, using different fuels, or process feed materials? ___YES ___NO
 - C. Note color of smoke: _____
3. A. Has the facility added any processes or expanded any pre-existing processes in the last two years? ___YES ☒ NO
 B. If YES: Did the facility obtain any state or federal air pollution permits for the expansion? ___YES ___NO*
4. A. Does the facility have any coating or printing operations? ___YES ☒ NO
 B. If YES:
 - ii. Are the coatings or inks used: water-based or solvent-based?
 - i. If solvent based, are all process lines controlled, or are coating formulations in use which comply with applicable limits? ___YES ___NO*
 - iii. What are the principal solvents or chemical compounds used in process lines? _____
 (Ask for copies of MSDS, if available.)

REFER to program office if you check an answer marked with *.

AIR, Continued

5. Observe: Are there strong solvent odors at the facility? ☐ YES* ☒ NO
7. Does the facility emit any of the following pollutants: mercury, beryllium, lead or asbestos? ☐ YES* ☒ NO
8. A. Does the facility emit, or use in its processes, vinyl chloride or benzene? ☐ YES* ☒ NO
- B. If YES:
- i. From which process lines? _____
- ii. Does the facility check for leaks on such process equipment? ☐ YES ☒ NO*
9. A. Has the facility undergone any renovations or demolitions during the last 18 months which involved the removal or disturbance of asbestos-containing materials? ☐ YES ☒ NO

If YES:

- B. Approximately how many square feet or linear feet of asbestos-containing materials were removed? _____
- C. If the amount exceeded 260 linear feet, or 160 square feet, *REFER* to Air program office; and Ask: was EPA notified of removal? YES NO*

✱ ✱ ✱ ✱ ✱

RADIATION

Ask:

1. Are any radioactive materials used or stored at this facility? YES X NO
2. If YES, does the facility have a state or federal radiation license? YES NO*

REFER to program office if you check an answer marked with *.

WATER**NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
And PRE-TREATMENT/UNDERGROUND INJECTION CONTROL (UIC)**

1. **Observe/Ask:** Does the facility dispose of any wastewater (e.g., from its manufacturing processes, wash water or other industrial wastes)? ___ YES X NO
2. **If yes:** Does the facility discharge wastewater into a--
 - receiving stream? ___ YES ___ NO
 - municipal sewer (sanitary or storm) system? ___ YES ___ NO
 - subsurface disposal system (septic system, drywell or cesspool)? ___ YES ___ NO

As applicable, ascertain the name of the stream or sewer system.

3. An NPDES permit is required for discharge to a waterbody; a pretreatment permit is usually issued by the municipality authorizing the discharge to a sanitary sewer system; and a UIC permit is required for subsurface disposal. Does the facility have a permit for each discharge? ___ YES NA NO*
4. Does the facility treat wastewater prior to discharge? ___ YES NA NO
5. **Observe:**
 - a. Is the effluent from the wastewater treatment facilities clear and free of solids? ___ YES NA NO*
 - b. Is equipment clean and well maintained? ___ YES ___ NO*
 - c. Are there any unusual odors? ___ YES* ___ NO
6. **Ask:** Is the effluent currently in compliance with the limitations established in the permit, or the terms of an administrative or judicial compliance order? ___ YES NA NO*

REFER to program office if you check an answer marked with *.

NPDES and UIC, Continued

7. Observe/Ask:

- a. How are waste fluids disposed of? *① antiseize - beneficial reuse
② waste oil parts - recycler
cleaner fluid*
- b. Does the facility have floor or storm drains? ☒ YES ☐ NO

If YES:

Is there fluid in the drains? *None observed* Is there evidence (staining, etc.) of fluid entering drains? *None observed* Are storm drains situated so that they could receive spills from truck loading accidents, etc? *Not observed*

- c. Does the facility operator indicate, or is there any evidence that any wastewater, or wastes/spills go into drains?
☐ YES* ☒ NO

PUBLIC WATER SUPPLY

1. Observe/Ask: Does the facility have its own water supply (i.e., a well)? ☐ YES ☒ NO
2. If YES: Does the facility provide potable water for 25 or more persons? ☐ YES ☐ NO
3. If YES: Is the facility sampling and analyzing for contaminants in its water supply and reporting the results to the state? ☐ YES ☐ NO*

REFER to program office if you check an answer marked with *.

EMERGENCY PLANNING AND COMMUNITY RIGHT-TO-KNOW ACT (EPCRA)**EMERGENCY PLANNING and COMMUNITY RIGHT TO KNOW****ASK:**

1. A. Does the facility have present any of the 360 "Extremely Hazardous Substances" in excess of established threshold planning quantities? ☐ YES ☒ NO

[Threshold planning quantities are established by regulation, vary by chemical, and range from 1 lb. to 5000 lbs.]

B. If YES: Was the State Emergency Response Commission (SERC) and Local Emergency Planning Committee (LEPC) notified of their presence for local planning purposes? ☐ YES ☒ NO*
2. A. Has the facility had a release of an Extremely Hazardous Substance or a CERCLA hazardous substance in excess of the Superfund reportable quantity? ☐ YES* ☒ NO

[Reportable quantities vary by substance, ranging from 1 lb. to 5000 lbs. For the purpose of this checklist, assume 1 lb.]

B. If YES: Was notification of the release provided? ☐ YES ☒ NO*

C. If YES:

 - i. To whom was the notification given?
 - ii. Was notification oral or written?
 - iii. If oral, was a written, follow-up report submitted? ☐ YES ☒ NO*

[If facility cannot identify to whom notification was given, cannot specify whether notification was written or oral, or is not certain whether oral notification was followed by a written follow-up report, *REFER*.]
3. A. Does the facility have on site Material Safety Data Sheets (MSDS) for all hazardous chemicals used, as required under OSHA's Hazard Communication Standard? ☒ YES ☐ NO*
- B. If any hazardous chemicals are present in excess of 10,000 lbs., or Extremely Hazardous Substances are present in excess of the threshold planning quantities, have the MSDS (or a list of MSDS), along with chemical inventory forms, been submitted to state and local emergency planning authorities and the local fire department? ☐ YES ☒ NA NO*

REFER to program office if you check an answer marked with *.

EPCRA, ContinuedTOXIC RELEASE INVENTORY (TRI)

Ask:

1. Does the facility have 10 or more full-time employees? ~66 ☒ YES ☐ NO
2. Is the facility classified under SIC codes 20 through 39? ☒ YES ☐ NO

If the response to either 1. or 2. is "NO," no further questions are required.

3. If both 1. and 2. are YES:

Did the facility use more than 10,000 lbs. of a chemical during a previous calendar year (starting with 1987). ☐ YES ☒ NO

4. If YES:

Did the facility file a Section 313 Toxic Chemical Release Inventory Form R for the chemical? ☐ YES ☒ NA NO*

For more EPCRA information, call 1-800-535-0202; or the Region II program offices for EPCRA-Emergency Planning and Community Right To Know at 908-321-6194 or for EPCRA-Toxic Release Inventory at 908-906-6890.

REFER to program office if you check an answer marked with *.

TOXIC SUBSTANCES CONTROL ACT (TSCA)

Ask:

1. A. Does the facility use electrical equipment that contains polychlorinated biphenyls (PCBs) (excluding small capacitors and florescent light ballasts)? YES* X NO
- B. IF YES:
 - i. How many oil filled electrical transformers does the facility have?
 - ii. How many PCB Transformers does the facility have (transformers which contain PCBs at concentrations of 500 ppm or greater)?
2. A. Does the facility have any high temperature hydraulic systems? YES X NO
- B. If YES:
 - i. Have PCBs ever been used in these systems? YES* NO
 - ii. What is the current PCB concentration in these systems?
3. A. Does the facility have any oil filled heat transfer systems? YES X NO
- B. If YES:
 - i. Have PCBs ever been used in these systems? YES* NO
 - ii. What is the current PCB concentration in these systems?
4. A. OBSERVE PCB Items (transformers, capacitors, containers)
 - Are any leaking? YES* NA NO
 - Do all have a PCB label? YES NO*
5. A. ASK: Does the facility have a PCB storage for disposal area? YES* X NO
- B. If YES, OBSERVE the PCB storage area. Does it have --
 - PCBs stored for disposal in it? YES* NA NO
 - a roof and walls to keep out rain? YES NO*
 - a 6" high impervious containment berm? YES NO*
 - a PCB label? YES NO*
 - Is it in the 100-year flood plain? YES* NO
 - Do all items show the date "removed from service for disposal"? YES NO*

REFER to program office if you check an answer marked with *.

TSCA, Continued

6. **ASK:** Does the facility manufacture or import into the United States "new commercial chemicals" [i.e., chemicals which were not previously manufactured in or imported into the United States]?
 ___ YES* X NO

[Note: Specific information on such chemicals is protected by TSCA as Confidential Business Information, and should not be obtained.]

For further TSCA information, call the TSCA Assistance Office in Washington at 202-554-1404 or the Region II TSCA program office at 908-321-6759.

* * * * *

SPILL PREVENTION, CONTROL AND COUNTERMEASURE (SPCC)

Ask:

1. A. Does the facility store oil? X YES ___ NO
- [Note that oil is not limited to petroleum products; for example, vegetable oil is covered.]
- B. If YES, does the storage capacity exceed -- $275 \times 4 = 1100$ X YES ___ NO
 $275 \times 1 = 275$ Kern
- i. 660 gallons in any one above-ground tank? ___ YES X NO
- ii. 1320 gallons in all above-ground tanks? X YES ___ NO
- iii. 42,000 gallons in underground tank(s)? ___ YES X NO
2. If the answer to any part of #1. B. was YES, does the facility have a Spill Prevention, Control, and Countermeasure (SPCC) Plan? ___ YES X NO*
3. Did the facility have an oil spill within the last 12 months? X YES* ___ NO

REFER to program office if you check an answer marked with *.

WETLANDS

1. Observe:

- A. Are there any wet areas (i.e., marshes, swamps, bogs) on or adjacent to the site, with or without wetlands-type vegetation such as cattails, rushes, or sedges? YES ☒ NO

[Sketches of several common wetlands plants are attached. Note that there need not be standing water in order for an area to be designated a federal wetland; and some wetlands have shrubs and trees present.]

- B. Are there any waterbodies or waterways on or adjacent to the site? YES ☒ NO

2. If answer to # 1. A or B was "YES," is there any work (clearing, filling, dredging, ditching, construction on or over the area, etc.) being conducted in these areas, or is there any evidence that such activities have occurred very recently? YES NO

3. If YES:

- A. When was the work undertaken? _____
- B. Does the facility have any permits for this work? YES NO*

4. If YES:

- A. What agency(s) issued such permits? _____
(E.g., U.S. Army Corps of Engineers; State environmental agency.)
- B. For any federal permits, what specific type of permits are they (i.e., nationwide, regional, individual)? _____

If facility is unable to provide adequate information in response to # 4., *REFER* to program office.

REFER to program office if you check an answer marked with *.

Attachment B

REGION II MEDIA PROGRAM SECTION CHIEFS (and Alternate Contacts)

RCRA: Joel Golumbek (NJ, Caribbean), 264-2638
John Gorman (NY), 264-2621

AIR (Except Asbestos): Karl Mangels (NY), 264-6684
Jehuda Menczel (NJ, Caribbean), 264-6680

AIR/ASBESTOS: Robert Fitzpatrick, 264-6770

UST: Dit Fai Cheung, 264-6069

TSCA: Dan Kraft, 340-6669
Dave Greenlaw, 340-6817

EPCRA: For Toxic Release Inventory: Dan Kraft, 340-6669
Nora Lopez, 340-6890

For Emergency Planning & Community Right-to-Know:
John Higgins, 340-6194

SPCC: Doug Kodama, 340-6905.

Federal Facilities: John Fillipelli, 264-6723

NPDES and Pretreatment: John Kushwara, 264-9878

UIC: Frank Brock, 264-1547

Public Water Supply: Robert Williams, 2164-3409

Wetlands: Daniel Montella, 264-5170

Removal Actions: Richard Salkie, 340-6658
Bruce Sprague, 340-6656
John Witkowski, 340-6991

Radiation: Paul Giardina, 264-4110
Mindy Pensak, 264-4418
Florie Caporuscio, 264-0503

Section Chiefs should contact their appropriate counterpart(s) on the above list concerning potential violations.

[illegible]

95
INC

Parts Sinks

95 Vermont Avenue
Babylon, New York 11704
(516) 242-9500

T
O

Department of General Svc.
Bureau of Audits & Accounts
Municipal Bldg., 17th Fl. Orange
New York N.Y. 10007

August 26, 19 93

INVOICE NO. 8/26 4430390

2	<p>Serviced @ : DGS/Motor Vehicles 1st. Fl. 11 Front St. Brooklyn, N.Y. 11201</p> <p>Model 30 Gallon Parts Washing Sinks @ \$69.30/ea. unit</p>	138	60
---	---	-----	----

Vendor Code: 112884980CN
Fund 001
Agency Code: 856
Order Number 4430390

BUREAU OF MOTOR VEHICLES
DEPT. OF GENERAL SERVICES

SEP 3 2 50 PM '93

PAY WITHIN 10 DAYS

1993 SEP -3 AM 9:59

AUDIT & ACCOUNTS
DEPT. OF GENERAL SERVICES
CITY OF NEW YORK

TERMS:
All bills payable within 10 days - a monthly service charge
of 1.5% per month will be applied to past due balance.

TAX	%		
TOTAL		138	60

NON-HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.

Manifest
Document No.

2. Page 1
of

3. Generator's Name and Mailing Address

~~Metropolitan~~
~~525 6th Street~~
~~Manhattan, NY 10011~~

D98
Motor
Vehicles

11th Front St.
Brooklyn

4. Generator's Phone ()

5. Transporter 1 Company Name
PRS 95 INC DBA 95 INC

6. US EPA ID Number

NYD 982741282

7. Transporter 2 Company Name

8. US EPA ID Number

9. Designated Facility Name and Site Address

10. US EPA ID Number

A. Transporter's Phone

B. Transporter's Phone

C. Facility's Phone

11. Waste Shipping Name and Description

a.

Waste Oils NOS Combustible Liquids UN 1255

b.

c.

d.

12. Containers
No. Type

13.
Total
Quantity

14.
Unit
Wt/Vol

0.01 DM 0.0015 G

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

N098

.078

T80

15. Special Handling Instructions and Additional Information

1-30

2 30's as per contract agreement.

16. GENERATOR'S CERTIFICATION: I certify the materials described above on this manifest are not subject to federal regulations for reporting proper disposal of Hazardous Waste.

Printed/Typed Name

Signature

Month Day Year

. . .

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

8 26 93

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

. . .

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of waste materials covered by this manifest except as noted in Item 19.

Printed/Typed Name

Signature

Month Day Year

. . .

GENERATOR

TRANSPORTER

FACILITY

Please print or type on this form (12-inch typewriter)
(Form designed for use on 11-inch typewriter)

NON-HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.

Manifest
Document No.

2. Page 1
of

3. Generator's Name and Mailing Address

4. Generator's Phone ()

5. Transporter 1 Company Name
PRS 95 INC DBA 95 INC

7. Transporter 2 Company Name

9. Designated Facility Name and Site Address

6. US EPA ID Number

NYD 982741282

8. US EPA ID Number

10. US EPA ID Number

A. Transporter's Phone

B. Transporter's Phone

C. Facility's Phone

11. Waste Shipping Name and Description

12. Containers
No. Type

13. Total
Quantity

14. Unit
Wt/Vol

a. Waste Oils NOS Combustible Liquids UN 1255

00

DM

00015

G

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

N098

.078

E. Handling Codes for Wastes Listed Above

T80

15. Special Handling Instructions and Additional Information

1-30

16. GENERATOR'S CERTIFICATION: I certify the materials described above on this manifest are not subject to federal regulations for reporting proper disposal of Hazardous Waste.

Printed/Typed Name

Signature

Month Day Year

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

PRS 95INC

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of waste materials covered by this manifest except as noted in Item 19.

Printed/Typed Name

Signature

Month Day Year

GENERATOR

TRANSPORTER

FACILITY



MATERIAL SAFETY DATA SHEET

97362 (4-85)		MSDS NUMBER	7,660-6	PAGE
24 HOUR EMERGENCY ASSISTANCE		GENERAL MSDS ASSISTANCE		BE SAFE READ OUR PRODUCT SAFETY INFORMATION ... AND PASS IT ON <small>(PRODUCT LIABILITY LAW REQUIRES IT)</small>
SHELL: 713-473-9461 CHEMTREC: 800-424-9300		SHELL: 713-241-4819		
ACUTE HEALTH	FIRE	REACTIVITY	HAZARD RATING	
2	2	0	LEAST - 0 SLIGHT - 1 MODERATE - 2 HIGH - 3 EXTREME - 4	
*For acute and chronic health effects refer to the discussion in Section III				

SECTION I		NAME
PRODUCT	SHELL SOL 140 HT	
CHEMICAL NAME	SOLVENT NAPHTHA (PETROLEUM), MEDIUM ALIPHATIC	
CHEMICAL FAMILY	HYDROCARBON SOLVENT	
SHELL CODE	83178	

SECTION II-A		PRODUCT/INGREDIENT
NO.	COMPOSITION	CAS NUMBER PERCENT

P SHELL SOL 140 HT* 64742-88-7 100

*A COMPLEX COMBINATION OF PREDOMINANTLY C9-C12 HYDROCARBONS; EXACT COMPOSITION WILL VARY.

SECTION II-B		ACUTE TOXICITY DATA
NO.	ACUTE ORAL LD50	ACUTE DERMAL LD50 ACUTE INHALATION LC50

** >25 ML/KG (RAT) >4 ML/KG (RABBIT) >700 PPM/4H (RAT)

**BASED ON EITHER PRODUCT OR ESSENTIALLY SIMILAR PRODUCT TESTING.

SECTION III		HEALTH INFORMATION
-------------	--	--------------------

THE HEALTH EFFECTS NOTED BELOW ARE CONSISTENT WITH REQUIREMENTS UNDER THE OSHA HAZARD COMMUNICATION STANDARD (29 CFR 1910.1200).

EYE CONTACT

LIQUID IS PRACTICALLY NONIRRITATING TO THE EYES.

SKIN CONTACT

LIQUID IS SLIGHTLY IRRITATING TO THE SKIN. PROLONGED OR REPEATED LIQUID CONTACT CAN RESULT IN DEFATTING AND DRYING OF THE SKIN WHICH MAY RESULT IN SKIN IRRITATION AND DERMATITIS.

INHALATION

VAPORS MAY CAUSE IRRITATION TO NOSE, THROAT, AND RESPIRATORY TRACT. HIGH VAPOR CONCENTRATIONS MAY RESULT IN CNS DEPRESSION.

INGESTION

INGESTION OF PRODUCT MAY RESULT IN VOMITING; ASPIRATION (BREATHING) OF VOMITUS INTO THE LUNGS MUST BE AVOIDED AS EVEN SMALL QUANTITIES MAY RESULT IN ASPIRATION PNEUMONITIS.

SIGNS AND SYMPTOMS

IRRITATION AS NOTED ABOVE. EARLY TO MODERATE CNS (CENTRAL NERVOUS SYSTEM) DEPRESSION MAY BE EVIDENCED BY GIDDINESS, HEADACHE, DIZZINESS AND NAUSEA; IN EXTREME CASES, UNCONSCIOUSNESS AND DEATH MAY OCCUR. ASPIRATION PNEUMONITIS MAY BE EVIDENCED BY COUGHING, LABORED BREATHING AND CYANOSIS

PRODUCT NAME: SHELL SOL 140 HT

MSDS 7,080-6
PAGE 2

(BLUISH SKIN); IN SEVERE CASES DEATH MAY OCCUR.

AGGRAVATED MEDICAL CONDITIONS

PREEXISTING EYE, SKIN, AND RESPIRATORY DISORDERS MAY BE AGGRAVATED BY EXPOSURE TO THIS PRODUCT.

SECTION IV OCCUPATIONAL EXPOSURE LIMITS

NO.	OSHA PEL/TWA	PEL/CEILING	ACGIH TLV/TWA	TLV/STEL	OTHER
1*	100 PPM		100 PPM		

RECOMMEND THAT LIMITS FOR STODDARD SOLVENT BE USED AS A GUIDE.

SECTION V EMERGENCY AND FIRST AID PROCEDURES**EYE CONTACT**

FLUSH EYES WITH PLENTY OF WATER FOR 15 MINUTES WHILE HOLDING EYELIDS OPEN. GET MEDICAL ATTENTION.

SKIN CONTACT

REMOVE CONTAMINATED CLOTHING/SHOES. FLUSH SKIN WITH WATER. FOLLOW BY WASHING WITH SOAP AND WATER. IF IRRITATION OCCURS, GET MEDICAL ATTENTION. DO NOT REUSE CLOTHING UNTIL CLEANED.

INHALATION

REMOVE VICTIM TO FRESH AIR AND PROVIDE OXYGEN IF BREATHING IS DIFFICULT. GIVE ARTIFICIAL RESPIRATION IF NOT BREATHING.

INGESTION

DO NOT INDUCE VOMITING. IF VOMITING OCCURS SPONTANEOUSLY, KEEP HEAD BELOW HIPS TO PREVENT ASPIRATION OF LIQUID INTO THE LUNGS. GET MEDICAL ATTENTION.*

NOTE TO PHYSICIAN

IF MORE THAN 2.0 ML PER KG HAS BEEN INGESTED AND VOMITING HAS NOT OCCURRED, EMESIS SHOULD BE INDUCED WITH SUPERVISION. KEEP VICTIM'S HEAD BELOW HIPS TO PREVENT ASPIRATION. IF SYMPTOMS SUCH AS LOSS OF GAG REFLEX, CONVULSIONS OR UNCONSCIOUSNESS OCCUR BEFORE EMESIS, GASTRIC LAVAGE USING A CUFFED ENDOTRACHEAL TUBE SHOULD BE CONSIDERED.

SECTION VI SUPPLEMENTAL HEALTH INFORMATION

RAT STUDIES: MALE RATS EXPOSED FOR 90 DAYS BY INHALATION TO VAPORS OF SIMILAR SOLVENTS SHOWED EVIDENCE OF KIDNEY DAMAGE. THE RELEVANCE OF THIS EFFECT TO MAN IS UNKNOWN. IN ONE OF THE STUDIES A LOW GRADE ANEMIA WAS ALSO OBSERVED.

SECTION VII PHYSICAL DATABOILING POINT: 368-402
(DEG F)SPECIFIC GRAVITY: 0.79
(H₂O=1)VAPOR PRESSURE: <5 @ 100 DEG F
(MM HG)MELTING POINT: NOT AVAILABLE
(DEG F)SOLUBILITY: NEGLIGIBLE
(IN WATER)VAPOR DENSITY: 5.3
(AIR=1)

EVAPORATION RATE (N-BUTYL ACETATE = 1): 0.03

APPEARANCE AND ODOR:
LIGHT COLORED LIQUID. HYDROCARBON ODOR.

SECTION VIII

FIRE AND EXPLOSION HAZARDS

FLASH POINT AND METHOD:
143 DEG F (TCC)

FLAMMABLE LIMITS /% VOLUME IN AIR
LOWER: 1 UPPER: 7

EXTINGUISHING MEDIA

USE WATER FOG, FOAM, DRY CHEMICAL OR CO2. DO NOT USE A DIRECT STREAM OF WATER. PRODUCT WILL FLOW AND CAN BE REIGNITED ON SURFACE OF WATER.

SPECIAL FIRE FIGHTING PROCEDURES AND PRECAUTIONS

CAUTION. COMBUSTIBLE. DO NOT ENTER CONFINED FIRE SPACE WITHOUT FULL BUNKER GEAR (HELMET WITH FAC SHIELD, BUNKER COATS, GLOVES AND RUBBER BOOTS). INCLUDING A POSITIVE PRESSURE NIOSH APPROVED SELF-CONTAINED BREATHING APPARATUS. COOL FIRE EXPOSED CONTAINERS WITH WATER.

UNUSUAL FIRE AND EXPLOSION HAZARDS

CONTAINERS EXPOSED TO INTENSE HEAT FROM FIRES SHOULD BE COOLED WITH WATER TO PREVENT VAPOR PRESSURE BUILDUP WHICH COULD RESULT IN CONTAINER RUPTURE. CONTAINER AREAS EXPOSED TO DIRECT FLAME CONTACT SHOULD BE COOLED WITH LARGE QUANTITIES OF WATER AS NEEDED TO PREVENT WEAKENING OF CONTAINER STRUCTURE.

SECTION IX

REACTIVITY

STABILITY: STABLE

HAZARDOUS POLYMERIZATION: WILL NOT OCCUR

CONDITIONS AND MATERIALS TO AVOID:

AVOID HEAT, FLAME AND CONTACT WITH STRONG OXIDIZING AGENTS.

HAZARDOUS DECOMPOSITION PRODUCTS

CARBON MONOXIDE AND UNIDENTIFIED ORGANIC COMPOUNDS MAY BE FORMED DURING COMBUSTION.

SECTION X

EMPLOYEE PROTECTION

RESPIRATORY PROTECTION

AVOID PROLONGED OR REPEATED BREATHING OF VAPORS. IF EXPOSURE MAY OR DOES EXCEED OCCUPATIONAL EXPOSURE LIMITS (SEC. IV) USE A NIOSH-APPROVED RESPIRATOR TO PREVENT OVEREXPOSURE. IN ACCORD WITH 29 CFR 1910.134 USE EITHER AN ATMOSPHERE-SUPPLYING RESPIRATOR OR AN AIR-PURIFYING RESPIRATOR FOR ORGANIC VAPORS.

OSHA HAS ESTABLISHED TRANSITIONAL OCCUPATIONAL EXPOSURE LIMITS FOR THIS PRODUCT AND/OR COMPONENTS OF THIS PRODUCT. REFER TO 29 CFR 1910.1000 FOR THESE TRANSITIONAL LIMITS AND REQUIREMENTS FOR MEETING THESE LIMITS.

PROTECTIVE CLOTHING

AVOID CONTACT WITH EYES. WEAR SAFETY GLASSES OR GOGGLES AS APPROPRIATE. AVOID PROLONGED OR REPEATED CONTACT WITH SKIN. WEAR CHEMICAL-RESISTANT GLOVES AND OTHER CLOTHING AS REQUIRED TO MINIMIZE CONTACT. TEST DATA FROM PUBLISHED LITERATURE AND/OR GLOVE AND CLOTHING MANUFACTURERS INDICATE THE*

ADDITIONAL PROTECTIVE MEASURES

*BEST PROTECTION IS PROVIDED BY NITRILE MATERIAL. USE EXPLOSION-PROOF VENTILATION AS REQUIRED TO CONTROL VAPOR CONCENTRATIONS. AIR-DRY CONTAMINATED CLOTHING IN A WELL VENTILATED AREA THEN LAUNDRER BEFORE REUSING.

NAME: SHELL SOL 140 HT

MSDS 7,680-6
PAGE 4

SECTION XI ENVIRONMENTAL PROTECTION

SPILL OR LEAK PROCEDURES

CAUTION. COMBUSTIBLE. *** LARGE SPILLS *** ELIMINATE POTENTIAL SOURCES OF IGNITION. WEAR APPROPRIATE RESPIRATOR AND OTHER PROTECTIVE CLOTHING. SHUT OFF SOURCE OF LEAK ONLY IF SAFE TO DO SO. DIKE AND CONTAIN. REMOVE WITH VACUUM TRUCKS OR PUMP TO STORAGE/SALVAGE VESSELS. SOAK UP RESIDUE WITH AN ABSORBENT SUCH AS CLAY, SAND, OR OTHER SUITABLE MATERIAL; PLACE IN NON-LEAKING CONTAINERS AND SEAL TIGHTLY FOR PROPER DISPOSAL. FLUSH AREA WITH WATER TO REMOVE TRACE RESIDUE; DISPOSE OF FLUSH SOLUTION AS ABOVE. *** SMALL SPILLS *** TAKE UP WITH AN ABSORBENT MATERIAL AND PLACE IN NON-LEAKING CONTAINERS FOR PROPER DISPOSAL.

SECTION XII SPECIAL PRECAUTIONS

KEEP LIQUID AND VAPOR AWAY FROM HEAT, SPARKS AND FLAME. SURFACES THAT ARE SUFFICIENTLY HOT MAY IGNITE EVEN LIQUID PRODUCT IN THE ABSENCE OF SPARKS OR FLAME. EXTINGUISH PILOT LIGHTS, CIGARETTES AND TURN OFF OTHER SOURCES OF IGNITION PRIOR TO USE AND UNTIL ALL VAPORS ARE GONE. VAPORS MAY ACCUMULATE AND TRAVEL TO IGNITION SOURCES DISTANT FROM THE HANDLING SITE; FLASH-FIRE CAN RESULT. KEEP CONTAINERS CLOSED WHEN NOT IN USE. USE WITH ADEQUATE VENTILATION.

CONTAINERS, EVEN THOSE THAT HAVE BEEN EMPTIED, CAN CONTAIN EXPLOSIVE VAPORS. DO NOT CUT, DRILL, GRIND, WELD OR PERFORM SIMILAR OPERATIONS ON OR NEAR CONTAINERS.

STATIC ELECTRICITY MAY ACCUMULATE AND CREATE A FIRE HAZARD. GROUND FIXED EQUIPMENT. BOND AND GROUND TRANSFER CONTAINERS AND EQUIPMENT.

SECTION XIII TRANSPORTATION REQUIREMENTS

DEPARTMENT OF TRANSPORTATION CLASSIFICATION:
COMBUSTIBLE LIQUID

D.O.T. PROPER SHIPPING NAME:
PETROLEUM NAPHTHA

OTHER REQUIREMENTS:
UN 1255. GUIDE SHEET 27.

SECTION XIV OTHER REGULATORY CONTROLS

THIS PRODUCT IS LISTED ON THE EPA/TSCA INVENTORY OF CHEMICAL SUBSTANCES

IN ACCORDANCE WITH SARA TITLE III, SECTION 313. THE EDS SHOULD ALWAYS BE COPIED AND SENT WITH THE MSDS.

SECTION XV STATE REGULATORY INFORMATION

PRODUCT NAME: SHELL SOL 140 HT

MSDS 7,880-6
PAGE 5

THIS INFORMATION IS BEING SYSTEMATICALLY ADDED TO OUR MSDS. IT HAS PREVIOUSLY BEEN PROVIDED TO YOU IN VARIOUS WAYS, INCLUDING THE MSDS. THE NEW MSDS FORMAT IS INTENDED TO PROVIDE THE USER WITH THE INFORMATION IN A MORE CONVENIENT MANNER.

SECTION XVI

SPECIAL NOTES

THE OCCUPATIONAL EXPOSURE LIMITS (SECTION IV) AND/OR THE RESPIRATORY PROTECTION PRECAUTIONS (SECTION X) HAVE BEEN REVISED.

THE INFORMATION CONTAINED HEREIN IS BASED ON THE DATA AVAILABLE TO US AND IS BELIEVED TO BE CORRECT. HOWEVER, SHELL MAKES NO WARRANTY, EXPRESSED OR IMPLIED REGARDING THE ACCURACY OF THESE DATA OR THE RESULTS TO BE OBTAINED FROM THE USE THEREOF. SHELL ASSUMES NO RESPONSIBILITY FOR INJURY FROM THE USE OF THE PRODUCT DESCRIBED HEREIN.

DATE PREPARED: JUNE 13, 1989

BE SAFE

READ OUR PRODUCT
SAFETY INFORMATION ...AND PASS IT ON
(PRODUCT LIABILITY LAW
REQUIRES IT)

J. C. WILLETT

SHELL OIL COMPANY
PRODUCT SAFETY AND COMPLIANCE
P. O. BOX 4320
HOUSTON, TX 77210

1. 40 C.F.R § 268.7(a)(7) and 6 NYCRR 376.1(g)(vii) require that generators must retain on-site a copy of all notices, certifications, and other documentation produced pursuant to this section for at least five years from the date that the waste that is subject of such documentation was last sent to off-site treatment, storage or disposal.

Manhattan BMW's land ban notifications associated with the following manifest numbers were missing from the file:

Manifest Number	Date
NYC2302233	88/88/88
NYC2514565	88/88/88

Therefore Manhattan BMW is in violation of 40 C.F.R § 268.7(a)(7) and 6 NYCRR 376.1(g)(vii).

In order to correct the violations outlined above and to return to compliance, Manhattan BMW must send a response to this letter stating that the violations mentioned above have been corrected. The following documents must be attached to the letter:

- o Copies of the land ban notifications accompanying the manifest records listed above.

Please provide the information requested in this Notice of Violation within thirty (30) days of receipt of this letter to:

Mr. Philip Lau
Environmental Engineer
U.S. Environmental Protection
Agency-Region II
26 Federal Plaza Room 1000G
New York, New York 10278

Failure to comply and submit the documentation requested in this Notice of Violation subjects you and/or your company to the enforcement provisions of Section 3008 of RCRA, 42 U.S.C. § 6928.

If you have any questions regarding this matter, please contact Mr. Philip Lau at (212) 264-6151.

Sincerely yours,

George C. Meyer, P.E., Chief
Hazardous Waste Compliance Branch

cc: Larry Nadler, Supervisor
Hazardous Waste Compliance Unit
New York State Department of Environmental
Conservation

bcc: Philip Lau, 2AWM-HWCB
John Gorman, 2AWM-HWCB
Joseph Clore, 2OPM-ISS



LAW DEPARTMENT

100 CHURCH STREET
NEW YORK, N.Y. 10007

Room 3-131

PAUL A. CROTTY
Corporation Counsel

(212) 788-1571

November 3, 1995

Mr. John Wilk, Environmental Specialist
U.S. Environmental Protection Agency
Region II Office
Hazardous Waste Compliance Branch
290 Broadway, 22nd Floor
New York, New York 10007-1866

Re: NYC Department of General Services facility
at 11 Front Street, Brooklyn, New York

Dear Mr. Wilk:

This will confirm our brief conversation of October 11, 1995. As you remember, on August 31, 1995, Assistant Corporation Counsel Robert Rosenthal called you to discuss lead-containing waste that was being held at a New York City Department of General Services (DGS) facility located at 11 Front Street in Brooklyn. Mr. Rosenthal recently left the Law Department and, as I explained, I am writing to follow-up on his call and to inform you of the actions that were taken to dispose of the lead-containing waste.

As I believe Mr. Rosenthal explained, the DGS facility is located below the Brooklyn Bridge, which, over the last several years, underwent sandblasting to remove old and peeling lead-based paint. Some of the sandblasted material had entered and settled on surfaces in the interior of the DGS facility, in the form of dust. Surveys conducted in 1992 and 1993 indicated that this dust contained lead. Accordingly, during May and June of 1993, DGS hired a lead dust abatement contractor to wet clean and HEPA vacuum all surfaces in the DGS facility. The resulting wastewater was collected and pumped into 55-gallon steel drums during the clean-up. In total, approximately 150 drums of wastewater were collected. The drums were then sealed, placed in the rear of the first floor of the DGS facility, and cordoned off with yellow warning tape. All solid waste, such as disposable coveralls, gloves, booties, respirator filters, polyethylene sheeting, duct tape and cleaning rags were collected and placed in polyethylene bags which were sealed and put alongside the drums.

As I understand you had suggested during the August 31 conversation, the Law Department worked with DGS to have the wastewater tested to determine the level of lead contamination,

and to quickly hire a licensed hazardous waste transportation and disposal firm. Enclosed as Exhibit A are copies of permits and authorizations held by the hired firm, named Cycle Chem Inc., a licensed treatment, storage and disposal facility located in Perth Amboy, New Jersey (EPA Identification number NJD-002-200-046). The tests indicated that the wastewater contained lead in concentrations ranging from 2 parts per million per liter ("ppm/l") to 74 ppm/l. Enclosed as Exhibit B is a report of sampling and testing conducted by Hill International, Inc. of New York, New York. All of the waste was disposed of by the end of September, 1995 by Cycle Chem at its New Jersey facility. Enclosed as Exhibit C are the partially completed waste manifests. I will provide copies of the fully completed manifests as soon as I receive them.

As Mr. Rosenthal may have mentioned to you, the Environmental Law Division of the New York City Law Department has taken measures to educate managers and staff at City agencies about and to help them prevent unpermitted hazardous waste-related activities. For example, we have conducted several seminars with fleet directors and other officials at the New York City Department of Transportation and other agencies regarding the requirements of the Federal Resource Conservation and Recovery Act ("RCRA"). This Division had also planned to conduct a RCRA compliance seminar with DGS, but the attorney handling that left City government before the seminar could be held. However, I recently began working for the Law Department and hope to resume that and other environmental compliance counseling work, as well, in the very near future.

If you have any questions about this, please contact me at the telephone number above.

Sincerely,



Heidi Rubinstein
Assistant Corporation Counsel
Environmental Law Division

c: N. Murphy, DGS-Legal
R. Sottile, DGS-Legal
M. Canu, DGS-Hazardous Materials
P. A. Gallay, NYSDEC

dgs\wilks.1

JUN-13-1985 09:58

TEL:

CLEAN VENTURE INC.

Sep 07 '95 10:15 No.001 P.04
308 325 7180 P.06 13

17-001 0000-000

NEW YORK STATE DEPARTMENT OF ENVIRONMENTAL CONSERVATION
DIVISION OF REGULATORY AFFAIRS • BUREAU OF REGULATORY MANAGEMENT
30 WOLF ROAD, ALBANY, NEW YORK 12219-1000

WASTE TRANSPORTER PERMIT

Permit No. 6 NYCRR Part 361 and Part 362

No. of Applications/Permits Accepted

22

PERMIT NUMBER JA-396	WASTE TRANSPORTER ID NUMBER NJ0000027193	ISSUE DATE & LICENSE NUMBER SEE LIST OF VEHICLES
TRUCK TO CONTAIN THAT: SHIPPER NAME CLEAN VENTURE INC MAILING ADDRESS 201 4 FIRST ST CITY ELIZABETH COUNTY OUT OF STATE STATE NJ ZIP CODE 07206		
Having complied with the provisions of the Environmental Conservation Law Title 2 and 16, of Article 27, it hereby certifies to engage in waste transporting within the State of New York in the manner described herein.		
TYPE OF WASTE AND LOCATION OF TREATMENT, STORAGE OR DISPOSAL FACILITY		
TRUCK # & INFORMATION	WASTE WASTE DESCRIPTION	
WJ0780991566 CITY ENVIRONMENTAL INC 1825 FREDERICK DETROIT MI 48211	WJ05 AUTHORIZED WASTE TO CITY ENVIRONMENTAL	
TRUCK # & INFORMATION	WASTE WASTE DESCRIPTION	
NJ0000000046 CYCLE CHEN INC 217 SOUTH FIRST STREET ELIZABETH NJ 07206	NJ29 AUTHORIZED WASTE TO CYCLE CHEN INC	
TRUCK # & INFORMATION	WASTE WASTE DESCRIPTION	
NJ00000000730 E Z DUPONT DE VERMOREL CHANDLER WORKS RTE 130 DEERPATER NJ 08023	NJ03 AUTHORIZED WASTE TO E Z DUPONT	
***** CONTINUED ON NEXT PAGE *****		
PAGE 2 OF 9 PAGES		
THIS PERMIT WILL EXPIRE AT MONTHS MAY 95 96 and is subject to revocation if the truck, the permittee, and the permittee's (a vehicle of which the Department of Environmental Conservation has issued the permit to be operated on this 02 JUNE 95 New York State Department of Environmental Conservation Representative		
NOTE: This Permit does not relieve the transporter of the responsibility of complying with any other applicable Federal, State or local regulations. Please refer to warning notice on back of this Permit.		

Clean Venture/Cycle Chem

The Environmental Services Source

Alan Kino
Spartan Dismantling Corporation
110 Fifth Street
Brooklyn, New York 11215

RE: Clarification of TSDP/Transporter Responsibilities

Dear Mr. Kino:

Cycle Chem, Inc is a Treatment Storage and Disposal Facility with a permanent EPA ID number, NJD 002 200 046. Operation of the facility is per a Part "B" Permit, No. 2004E2HP05, issued by the State of New Jersey Department of Environmental Protection in accordance with N.J.S.A. 13:1E-1. Cycle Chem, Inc must operate within the guidelines set forth in its permit. Examples include the following: types of acceptable waste, i.e. lead contaminated debris, how this waste can be stored (drums/tanks), and the amount of waste that can be stored. General requirements for a TSDP under New Jersey regulations N.J.A.C 7:26-9.4 et seq require liability coverage for sudden occurrences of bodily injury and property damage. Cycle Chem, Inc meets this satisfactorily with coverage through by Reliance National Indemnity Company, policy number NTA 100 000 000.

Clean Venture, Inc is a licensed transporter of hazardous and solid waste in the states of New Jersey, NJDEP permit number S-5811, and New York, NYMDEC permit number JA-396. The New Jersey Permit allows Clean Venture to transport any waste in New Jersey. Most states require a permit such as this to transport within their boundaries. New York has its own requirement that the transporter gets an additional authorization from the TSDP before the waste can be delivered to that destination. Clean Venture is allowed to transport waste generated in New York directly to Cycle Chem, Inc, E.I. DuPont De Nemours and City Environmental. The proper insurances are also in place with respect to liability insurance and Fire insurance.

If you have any further questions, do not hesitate to call me at (908) 335-5800.

Yours truly,



Diane J. Estrella
Regulatory & Compliance Officer



State of New Jersey
Department of Environmental Protection and Energy
Environmental Regulation
Hazardous Waste Regulation Program

CN 421

Trenton, NJ 08625-0421
Tel. 609-632-1418

Jeanne M. Fox
Acting Commissioner

Frank Coolick
Administrator

DEC 10 1993

Michael S. Persico, President
Cycle Chem Inc.
217 S. First Street
Elizabeth, NJ 07206

RE: Authorization for Hazardous Waste Facility Operations at Cycle
Chem Inc., Elizabeth, Union County, EPA ID No. NJD 002 200 046

Dear Mr. Persico:

The Bureau of Hazardous Waste Engineering (the "Bureau")
acknowledges receipt of your letters dated November 15 and 23,
1993, regarding continued operation of your facility following
expiration of your current hazardous waste facility permit (no.
200422WP05) on December 14, 1993.

Please be advised that until a final determination is issued on the
hazardous waste facility permit application of Cycle Chem Inc.,
Cycle Chem is authorized to continue operation of its hazardous
waste facility subject to the Conditions of Hazardous Waste
Facility Permit No. 200422WP05.

If you have any questions on this matter, please contact Scot J.
Frow of my staff at (609) 292-9880.

Very truly yours,

Thomas Sherman, Chief
Bureau of Hazardous Waste Engineering

EP48/dhm

c: Michael Poetsch, USEPA
Peter T. Lynch, MBWHWE

DOCUMENT: a:jxsl3

Page 1 of 44 Cycle-Chem, Inc. Permit



State of New Jersey
DEPARTMENT OF ENVIRONMENTAL PROTECTION
DIVISION OF HAZARDOUS WASTE MANAGEMENT

CN 028

Trenton, N.J. 08628-0028

(609) 633-1406

Fax: (609) 633-1464

Hazardous Waste Facility Permit

Under the provisions of N.J.S.A. 13:27-1 et seq. known as the Solid Waste Management Act, this permit is hereby issued to:


Cycle-Chem, Inc.
 217 South First Street
 Elizabeth, New Jersey 07206

For the Purpose of Operating:	Hazardous Waste Storage and Treatment Facility and Transfer Station
on Lot No.:	865 and part of 74
Block No.:	2
in the Municipality of:	Elizabeth
County:	Union
Under Facility Permit No.:	2004E2H204

This permit is subject to compliance with all conditions specified herein and all regulations promulgated by the Department of Environmental Protection.

This permit shall not prejudice any claim the State may have to Riparian land nor does it permit the registrant to fill or alter, or allow to be filled or altered, in any way, lands that are deemed to be Riparian, Wetlands, stream encroachment or flood plains, or within the Coastal Area Facility Review Act (CAFRA) zone or allow the discharge of pollutants to waters of this State without first acquiring the necessary grants, permits, or approvals from the Department of Environmental Protection or the U.S. Environmental Agency.

December 14, 1988
 Date


 Frank Cielick
 Assistant Director

February 23, 1989

Modified

March 29, 1990

Modified

December 28, 1990

Modified

December 14, 1993

Expiration Date

New Jersey is an Equal Opportunity Employer
 Recycled Paper



RECEIVED NOV 1 1 1997

RECEIVED AUG 1 1 1997



**ACKNOWLEDGEMENT OF NOTIFICATION
OF HAZARDOUS WASTE ACTIVITY**

This is to acknowledge that you have filed a Notification of Hazardous Waste Activity for the installation located at the address shown in the box below to comply with Section 3010 of the Resource Conservation and Recovery Act (RCRA). Your EPA Identification Number for that installation appears in the box below. The EPA Identification Number must be included on all shipping manifests for transporting hazardous wastes; on all Annual Reports that generators of hazardous waste, and owners and operators of hazardous waste treatment, storage and disposal facilities must file with EPA; on all applications for a Federal Hazardous Waste Permit; and other hazardous waste management reports and documents required under Subtitle C of RCRA.

EPA I.D. NUMBER

NJ0002200046

CYCLE CHEM, INC.
217 SOUTH FIRST STREET
ELIZABETH

NJ 07208

INSTALLATION ADDRESS

217 SOUTH FIRST ST.
ELIZABETH

NJ 07208

EPA Form 8700-12A (4-80)

05/25/95

ADDPD 88-8 10/10

SECRET

104890000



Hill International, Inc.

September 8, 1995

Mr. Mark Canu, Director
Hazardous Materials Unit
Department of General Services
280 Broadway, Room 403
New York, NY 10017

**RE: Program to Evaluate the Disposal of Power Wash, Lead Wastewater
DMS Warehouse / DFTS Garage
11 Front Street / 11 Water Street
Project No. AAU930007
Brooklyn, NY**

Dear Mr. Canu:

The following is a brief report for the above-mentioned project:

Background

Approximately 150 drums of lead laden power wash wastewater had been collected and stored in the subject garage. These drums were collected in conjunction with the removal of lead dust present in the facility, which resulted from the cleaning of the steel structure of the adjacent Brooklyn Bridge. The removal and ultimate disposal of the drums is now being addressed and a cost effective strategy is being developed.

Program Design

On August 29, 1995, a site visit was performed. In attendance were Dr. David B. Rimberg (Hill), Mark Canu (DGS Hazardous Materials), and Bob Rosenberg (NYC Department of Law). The purpose of the visit was to evaluate the condition of the drums, sample selected ones, and provide preliminary recommendations for removal and disposal. The following observations, sampling results, recommendations, and conclusions are provided:

\\hill\personal\h1all\mendes.cov\11front.stx

200 Park Avenue South, 7th Floor, New York, NY 10003 Tel (212) 292-3500 Fax (212) 292-3501

Offices Worldwide



Mr. Mark Canu, Director
DMS Warehouse / DFTS Garage
11 Front Street / 11 Water Street
September 8, 1995
Page 2

Observations

- Approximately 90 cubic yards of plastic bags containing rags, debris, etc. are present.
- Many of the bags cover the drums.
- Several of the drums' bottom have bowed out and therefore require special handling.
- No significant drum corrosion was noticed.

Sampling Results

Four drums were selected, three of which had been previously sampled (sample numbers ATC 1,2,3). For comparison purposes, the previously sampled drums were sampled again. Mid level and lower portions were sampled using a 6' drum core sampler. Precautions were taken not to sample sludge from drum bottom since it would bias the sample and preclude the possibility of using filtration to condense the lead based material.

Graphite furnace atomic absorption spectrometry was used to analyze the four collected sample sets. The results are presented here:

<u>Sample No.</u>	<u>Concentration ppm (mg/l)</u>
1 T (ATC2)	11.13
1 B (ATC2)	74.16
2 T (ATC1)	2.90
2 B (ATC1)	2.18
3 T (ATC3)	10.24
3 B (ATC3)	10.56
4 T	3.47
4 B	5.00

T = Mid Level
B = Bottom Level
ATC = Previously Sampled



Mr. Mark Canu, Director
DMS Warehouse / DFTS Garage
11 Front Street / 11 Water Street
September 8, 1995
Page 3

Notwithstanding the presence of sludge (approximately 1-3"), the concentration of lead is relatively high and therefore requires special handling. Furthermore, the presence of waterborne grease in all samples would preclude the use of filtration to concentrate the lead.

Recommendations

- Remove plastic bags; (check contents for lead containing materials)
- Bowed drums need to be handled using a secondary containment or other suitable means for safe transport
- Regular drums should be disposed of as hazardous waste according to 40 CFR 262

Conclusions

Cost estimates and a technical proposal to remove and dispose of the bagged and drummed waste should be obtained from certified waste hauling company's certified to do business in New York City.

Sincerely,
Hill International, Inc.

A handwritten signature in dark ink, appearing to read "D. B. Rimberg", is written over the printed name.

David B. Rimberg, Ph.D
Director, Air Quality & Industrial Hygiene Programs

Clean Venture/Cycle Chem

The Environmental Services Source

Alan Kino
Spartan Dismantling Corporation
110 Fifth Street
Brooklyn, New York 11215

RE: Clarification of TSD/Transporter Responsibilities

Dear Mr. Kino:

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Clean Venture, Inc is a licensed transporter of hazardous and solid waste in the states of New Jersey, NJDEP permit number S-5811, and New York, NYSDOC permit number JA-396. The New Jersey Permit allows Clean Venture to transport any waste in New Jersey. Most states require a permit such as this to transport within their boundaries. New York has its own requirement that the transporter gets an additional authorization from the TSD before the waste can be delivered to that destination. Clean Venture is allowed to transport waste generated in New York directly to Cycle Chem, Inc, E.I. Dupont De Nemours and City Environmental. The proper insurances are also in place with respect to liability insurance and fire insurance.

If you have any further questions, do not hesitate to call me at (908)355-5800.

Yours truly,



Diane J. Estrella
Regulatory & Compliance Officer



State of New Jersey
Department of Environmental Protection and Energy
Environmental Regulation
Hazardous Waste Regulation Program

CN 421

Trenton, NJ 08625-0421

Tel. 609-633-1418

Joanne M. Fox
Acting Commissioner

Frank Coolick
Administrator

DEC 10 1993

Michael S. Persico, President
Cycle Chem Inc.
217 S. First Street
Elizabeth, NJ 07206

RE: Authorization for Hazardous Waste Facility Operations at Cycle
Chem Inc., Elizabeth, Union County, EPA ID No. NJD 002 200 046

Dear Mr. Persico:

The Bureau of Hazardous Waste Engineering (the "Bureau")
acknowledges receipt of your letters dated November 15 and 23,
1993, regarding continued operation of your facility following
expiration of your current hazardous waste facility permit (no.
2004E2HP05) on December 14, 1993.

Please be advised that until a final determination is issued on the
hazardous waste facility permit application of Cycle Chem Inc.,
Cycle Chem is authorized to continue operation of its hazardous
waste facility subject to the Conditions of Hazardous Waste
Facility Permit No. 2004E2HP05.

If you have any questions on this matter, please contact Scott J.
Prow of my staff at (609) 292-9880.

Vary truly yours,

Thomas Sherman, Chief
Bureau of Hazardous Waste Engineering

EP48/dbm

c: Michael Poetzsch, USEPA
Peter T. Lynch, MBWHWE

DOCUMENT: a:jks13

NEW YORK STATE DEPARTMENT OF ENVIRONMENTAL CONSERVATION
DIVISION OF REGULATORY AFFAIRS - BUREAU OF REGULATORY MANAGEMENT
30 WOLFF BOULEVARD, ALBANY, NEW YORK 12212-1760

WASTE TRANSPORTER PERMIT
Pursuant to 6 NYCRR Part 364 and Part 367 No. of additional pages attached: **02**

WASTE PERMIT NUMBER JA-396	WASTE TRANSPORTER ID NUMBER NJ0000027193	ISSUING STATE & LICENSE NUMBER SEE LIST OF VEHICLES
VEHICLE TO CARRY WASTE		
BUSINESS NAME CLEAN VENTURE INC		
MAILING ADDRESS 201 4 FIRST ST		
CITY ELIZABETH	COUNTY CLINTON	ZIP CODE 07206
HAVING COMPLIED WITH THE PROVISIONS OF THE ENVIRONMENTAL CONSERVATION LAW TITLES 3 AND 16, OF ARTICLE 27, IT HEREBY SUBSCRIBES TO ENGAGE IN WASTE TRANSPORTING WITHIN THE STATE OF NEW YORK IN THE MANNER DESCRIBED HEREIN.		
TYPE OF WASTE AND LOCATION OF TREATMENT, STORAGE OR DISPOSAL FACILITY		
TYPE OF WASTE INFORMATION WASTE WASTE DESCRIPTION		
WJ0980321566 WJ05 AUTHORIZED WASTE TO CITY ENVIRONMENTAL CITY ENVIRONMENTAL INC 1923 FASBERG DETROIT MI 48214		
TYPE OF WASTE INFORMATION WASTE WASTE DESCRIPTION		
NJ0002300048 WJ29 AUTHORIZED WASTE TO CYCLE CHEM INC CYCLE CHEM INC 217 SOUTH FIRST STREET ELIZABETH NJ 07206		
TYPE OF WASTE INFORMATION WASTE WASTE DESCRIPTION		
NJ0002365730 WJ03 AUTHORIZED WASTE TO EZ SUPPLY EZ SUPPLY DE VEROURS CHAMBERS WORKS RTE 150 DEERHATER NJ 08023		
***** CONTINUED ON NEXT PAGE *****		
PAGE 2 OF 9 PAGES		
THIS PERMIT WILL EXPIRE AT MIDNIGHT MAY 31 1996		
In addition to when the Department of Environmental Conservation has issued this permit to be processed on this 02 JUNE 95		
New York State Department of Environmental Conservation Representative		
NOTE: This Permit does not relieve the transporter of the responsibility of complying with any other applicable federal, state or local regulations. Please refer to warning notice on back of this Permit.		

RECEIVED AUG 11 1987
RECEIVED AUG 11 1987



ACKNOWLEDGEMENT OF NOTIFICATION
OF HAZARDOUS WASTE ACTIVITY

This is to acknowledge that you have filed a Notification of Hazardous Waste Activity for the installation located at the address shown in the box below to comply with Section 8010 of the Resource Conservation and Recovery Act (RCRA). Your EPA Identification Number for that installation appears in the box below. The EPA Identification Number must be included on all shipping manifests for transporting hazardous wastes; on all Annual Reports that generators of hazardous waste, and owners and operators of hazardous waste treatment, storage and disposal facilities must file with EPA; on all applications for a Federal Hazardous Waste Permit; and other hazardous waste management reports and documents required under Subtitle C of RCRA.

EPA ID NUMBER

NJ0002200046

INSTALLATION ADDRESS

CYCLE CHEM. INC.
217 SOUTH FIRST STREET
ELIZABETH

NJ 07208

217 SOUTH FIRST ST.
ELIZABETH

NJ 07208



State of New Jersey
DEPARTMENT OF ENVIRONMENTAL PROTECTION
DIVISION OF HAZARDOUS WASTE MANAGEMENT
CN 028
Trenton, N.J. 08625-0028
(609) 633-1408
Fax: (609) 633-1454

Hazardous Waste Facility Permit

Under the provisions of N.J.S.A. 17:27-1 as amended, known as the Solid Waste Management Act, this permit is hereby issued to:

Cycle-Chem, Inc.
217 South First Street
Elizabeth, New Jersey 07206

For the Purpose of Operating a	Hazardous Waste Storage and Treatment Facility and Transfer Station
on Lot No.:	665 and part of 74
Block No.:	2
In the Municipality of:	Elizabeth
County:	Union
Under Facility Permit No.:	2004E2HP04

This permit is subject to compliance with all conditions specified herein and all regulations promulgated by the Department of Environmental Protection.

This permit shall not prejudice any claim the State may have to Riparian land nor does it permit the registrant to fill or alter, or allow to be filled or altered, in any way, lands that are deemed to be Riparian, Wetlands, stream encroachment or flood plains, or within the Coastal Area Facility Review Act (CAFRA) zone or allow the discharge of pollutants to waters of this State without first acquiring the necessary grants, permits, or approvals from the Department of Environmental Protection or the U.S. Environmental Protection Agency.

December 14, 1988
Date

Frank Coolick
Assistant Director

February 23, 1989

Modified

March 29, 1990

Modified

December 28, 1990

Modified

December 14, 1993

Expiration Date



ACORD. CERTIFICATE OF INSURANCE

PHOTOGRAPH

MARSHALL INSURANCE BROKERS NEW YORK INC
 1155 AVENUE OF THE AMERICAS
 NEW YORK, NY 10036

1999

Olson Venture, Inc
201 So. First Street
Elizabeth, NJ 07208-1503

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW.

COMPANIES ATTENDING COVERAGE

COMPANY
A National Mutual Indemnity Company

CONCLUSIONS

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COVERLINE

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED, NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR INSTRUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN. THE INSURANCES AFFORDED BY THE POLICIES DESCRIBED HEREIN ARE SUBJECT TO ALL THE TERMS, DECLARATIONS AND CONDITIONS OF SUCH POLICIES WHICH ARE SHOWN MAY HAVE BEEN PRODUCED BY PAID CLAIMS.

CO LINE	TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE (DATE OF COMMENCEMENT)	POLICY EXPIRATION (DATE OF EXPIRATION)	LIMITS
A	GENERAL LIABILITY COMMERCIAL GENERAL LIABILITY <input checked="" type="checkbox"/> SLIP AND FALL OCCUR PRODUCTS & COM. PROP. ...	NCB2610023-01	10/20/94	10/20/95	GENERAL AGGREGATE \$ 4,000,000 PRODUCTS & COM. PROP. AGG. \$ 3,000,000 PERSONAL & ADV. LIABILITY \$ 3,000,000 SLIP & OCCURRENCE \$ 3,000,000 FIRE DAMAGE (Any one loss) \$ 500,000 LEGAL DEF. (Any one person) \$ 5,000
A	AUTOMOBILE LIABILITY ANY AUTO <input checked="" type="checkbox"/> UNOWNED AUTOM. <input checked="" type="checkbox"/> FIRE/STEAL AUTOM. <input checked="" type="checkbox"/> HIRE & AUTO <input checked="" type="checkbox"/> RENTOWNED AUTOM. RENT-90 Applied DAMAGE LIABILITY <input type="checkbox"/> ANY AUTO	NKA1258887-04	04/04/95	04/04/96	UNOWNED SINGLE AUTO \$ 5,000,000 BODILY INJURY (P & AD) \$ BODILY INJURY (P & AD) \$ PROPERTY DAMAGE \$ AUTO ONLY - SP. AGREEMENT \$ OTHER THAN AUTO ONLY \$ EACH AGGREGATE \$ AGGREGATE \$
	FIDELITY LIABILITY <input type="checkbox"/> UNIVERSAL FIDELITY <input type="checkbox"/> OTHER THAN UNIVERSAL FIDELITY				EACH OCCURRENCE \$ AGGREGATE \$ \$
	EMPLOYERS RESPONSIBILITY AND EMPLOYERS LIABILITY THE INSURANCE EMPLOYERS LIABILITY AND OCCURRENCE \$ <input checked="" type="checkbox"/> FOR <input type="checkbox"/> THIS				<input checked="" type="checkbox"/> EMPLOYERS LIABILITY EACH EMPLOYEE \$ EMPLOYERS LIABILITY \$ EMPLOYERS LIABILITY \$
A	CONTRACTORS PROFESSIONAL Legal Liability Contractors Professional ...	NCB2610023-01 NCIP27462	10/20/94 11/01/94	10/20/95 11/01/95	Each Loss \$5,000,000 Total All Losses \$5,000,000 \$1,071,458

CERTIFICATE HOLDER

Clean Venture, Inc.
201 South First Street
Elizabeth, New Jersey 07206-1302

CANCELLATION

MEMBERSHIP LIST OF THE ABOVE DESCRIBED SOCIETY IS CANCELLED BECAUSE THE EXPIRATION DATE THEREOF, THE FOLLOWING COMPANY HAS MEMBERSHIP IN THE

30 DAYS WRITTEN NOTICE TO THE PUBLISHERS HEREIN GRANTED TO THE (A).
THE FAILURE TO GIVE SUCH NOTICE SHALL IMPOSE NO PENSION OR LIABILITY
OF ANY KIND UPON THE COMPANY, ITS AGENTS OR REPRESENTATIVES.

AUTOMATIC REPLY

ADDP 22-6 0120

• ACORN CORPORATION 1205

PRODUCER Praxtel & Co., Inc. 123 William Street New York, NY 10038 212-297-7200		THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW.	
WORKER Clean Venture Inc 201 South First Street Elizabeth NJ 07208		COMPANIES AFFORDING COVERAGE COMPANY LETTER A National Union Fire Ins. Co. COMPANY LETTER B COMPANY LETTER C COMPANY LETTER D COMPANY LETTER E	

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE PERIOD PERIOD INDICATED, NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT. IT IS THE POLICY OF THE ISSUING COMPANY THAT THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES & COVERAGE HEREIN IS SUBJECT TO ALL THE TERMS, COVENANTS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YY)	POLICY EXPIRATION DATE (MM/DD/YY)	LIMITS
GENERAL LIABILITY COMMERCIAL GENERAL LIABILITY CLAIMS MADE WORKERS & CONTRACTORS PROPS.				COMMERCIAL LIABILITY 2 COMMERCIAL AUTOMOBILE 2 PERSONAL & AUTO 2 AUTO 2 AUTO DAMAGE (ANY ONE PERSON) 2 AUTO DAMAGE (ANY ONE PERSON) 2
AUTOMOBILE LIABILITY OWN AUTO ALL OTHER AUTOS OTHER AUTOS OTHER AUTOS OTHER AUTOS OTHER AUTOS				COMBINED SINGLE LIMIT 2 BODILY INJURY (PER PERSON) 2 BODILY INJURY (PER PERSON) 2 PROPERTY DAMAGE 2
WORKERS COMPENSATION WORKERS COMPENSATION WORKERS COMPENSATION				WORKERS COMPENSATION 2 WORKERS COMPENSATION 2
WORKERS COMPENSATION WORKERS COMPENSATION WORKERS COMPENSATION	WC8710430	5/17/95	5/17/98	WORKERS COMPENSATION 2 WORKERS COMPENSATION 2 WORKERS COMPENSATION 2
OTHER				

DESCRIPTION OF OPERATIONS AND AUTOMOBILE INFORMATION

Clean Venture, Inc. 201 South First Street Elizabeth, New Jersey 07208	SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, THE ISSUING COMPANY WILL ENDEAVOR TO MAIL 30 DAYS WRITTEN NOTICE TO THE CERTIFICATE HOLDER NAMED TO THE LEFT, BUT FAILURE TO MAIL SUCH NOTICE SHALL IMPOSE NO OBLIGATION OR LIABILITY OF ANY KIND UPON THE COMPANY, ITS AGENTS OR REPRESENTATIVES.
E. V. [Signature] 104006000	

ACORD CERTIFICATE OF INSURANCE

DATE (MM/DD/YY)

04/04/95

PRODUCER

Jardins Insurance Brokers
New York, Inc.
1155 Avenue of the Americas
New York, NY 10036

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW.

COMPANIES AFFORDING COVERAGE

COMPANY

A Alliance National Indemnity Company

COMPANY

B Arma Casualty & Surety Co.

COMPANY

C

COMPANY

D

INSURED

Cycle Chem, Inc.
217 South First Street
Elizabeth, NJ 07206

COVERAGES

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED, NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN. THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

CO LTY	TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YY)	POLICY EXPIRATION DATE (MM/DD/YY)	LIMITS
A	GENERAL LIABILITY	N5B2510023-01	10/20/94	10/20/95	GENERAL AGGREGATE \$ 2,000,000
	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY				PRODUCTS/COMPOUND AGG \$ 5,000,000
	<input checked="" type="checkbox"/> CLAIMS MADE <input type="checkbox"/> OCCUR				PERSONAL & ADV INJURY \$ 2,000,000
	<input type="checkbox"/> OWNERS & CONSUMERS PRO				EACH OCCURRENCE \$ 5,000,000
					FIRE DAMAGE (Any one fire) \$ 50,000
A	AUTOMOBILE LIABILITY	NKA1259487-08	04/04/95	04/04/95	MED EXP INJURY any person \$ 5,000
	<input type="checkbox"/> ANY AUTO				COMBINED SINGLE LIMIT \$ 3,000,000
	<input checked="" type="checkbox"/> ALL OWNED AUTOS				BODILY INJURY (All persons) \$
	<input checked="" type="checkbox"/> RENTED AUTOS				BODILY INJURY (All persons) \$
	<input checked="" type="checkbox"/> HIRED AUTOS				PROPERTY DAMAGE \$
A	LIABILITY				AUTO ONLY - SA ACCIDENT \$
	<input type="checkbox"/> ANY AUTO				OTHER THAN AUTO ONLY \$
					EACH ACCIDENT \$
					AGGREGATE \$
					EACH OCCURRENCE \$
B	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY	03800024207292CAA	07/22/94	07/22/95	AGGREGATE \$
	<input type="checkbox"/> UMBRELLA FORM				STATUTORY LIMITS
	<input type="checkbox"/> OTHER THAN UMBRELLA FORM				EACH ACCIDENT \$ 100,000
	THE PROPRIETOR PARTNERS/EXECUTIVE OFFICERS AND OTHER				DISEASE - POLICY LIMIT \$ 500,000
					DISEASE - EACH EMPLOYEE \$ 100,000
A	Pollution Liability	NTA1255531-07	04/04/95	04/04/95	1,000,000 each loss
	Claims Made				2,000,000 all losses/Aggr.
					100,000 Ded. each loss

DESCRIPTION OF OPERATIONS/VEHICLES/SPECIAL ITEMS

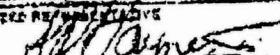
CERTIFICATE HOLDER

SAMPLE CERTIFICATE OF INSURANCE

CANCELLATION

IF ANY OF THE ABOVE DESCRIBED POLICIES IS CANCELLED BEFORE THE EXPIRATION DATE THEREOF, THE ISSUING COMPANY WILL ENDEAVOR TO MAIL 30 DAYS WRITTEN NOTICE TO THE CERTIFICATE HOLDER NAMED TO THE LEFT. BUT FAILURE TO MAIL SUCH NOTICE SHALL IMPOSE NO LIABILITY OR LIABILITY OF ANY KIND UPON THE COMPANY, ITS AGENTS OR REPRESENTATIVES.

AUTHORIZED REPRESENTATIVE



ACORD 25-B (3/93)

© ACORD CORPORATION 1993

TOTAL P.01



State of New Jersey
Department of Environmental Protection
Hazardous Waste Regulation Program
Manifest Section

CN 421, Trenton, NJ 08625-0421 **EMERGENCY CONTACT:**

Form Approved, OMB No. 2050-0039 Expires 9-30-96

Please type or print in block letters. (Form designed for use on elite (12-pitch) typewriter.)

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator's US EPA ID No. NJ 510000138615	Manifest Document No. NJ 1100003	2. Page 1	Information in the shaded areas is not required by Federal law.	
3. Generator's Name and Mailing Address CITY OF NEW YORK DEPT OF GENERAL SERVICES 200 BROADWAY NEW YORK, NY (212) 277-1001				A. State Manifest Document Number NJA 2116847		
4. Generator's Phone				B. State Generator's ID (Gen. Site Address) 11 FRONT STREET		
5. Transporter 1 Company Name DICAR ASBESTOS LTD DBA PHOENIX DISP		6. US EPA ID Number NYC0000351218		C. State Trans. ID-NJDEPE 8-20082		
7. Transporter 2 Company Name		8. US EPA ID Number		D. Transporter's Phone (718) 522-2263		
9. Designated Facility Name and Site Address S&W WASTE, INC. 105 JAYBUR AVENUE SOUTH KENNY, NJ 07032		10. US EPA ID Number		E. State Trans. ID-NJDEPE		
				Decal No.:		
				F. Transporter's Phone ()		
				G. State Facility's ID		
				H. Facility's Phone (201) 319 9100		
11. US DOT Description (Including Proper Shipping Name, Hazard Class or Division, ID Number and Packing Group) HM				12. Containers No. Type	13. Total Quantity	14. Unit Wt/Vol
a. X 100. HAZARDOUS WASTE SOLID, NCS, 9, NA3077, POLY (LEAD EPA 6008)				1 X 1 CN	111130	Y 2000
b.						
c.						
d.						
J. Additional Descriptions for Materials Listed Above S&W APPENDIX (in 1000) S/E PAINT CHIPS, WALL BOARD, PLASTIC, DERRIS, PFE				K. Handling Codes for Wastes Listed Above		
a.				a.	c.	
b.				b.	d.	
15. Special Handling Instructions and Additional Information IN CASE OF EMERGENCY CALL (718) 522-2263 24 Hrs						
16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations. If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment, OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and secure the best waste management method that is available to me and that I can afford.						
Printed/Typed Name INTIAZ ALI				Signature <i>[Signature]</i>		Month Day Year ____/____/____
17. Transporter 1 Acknowledgement or Receipt of Materials				Signature		Month Day Year ____/____/____
Printed/Typed Name				Signature		Month Day Year ____/____/____
18. Transporter 2 Acknowledgement or Receipt of Materials				Signature		Month Day Year ____/____/____
Printed/Typed Name				Signature		Month Day Year ____/____/____
19. Discrepancy Indication Space						
20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in item 19						
Printed/Typed Name				Signature		Month Day Year ____/____/____

NJA 2116847



State of New Jersey
Department of Environmental Protection
Hazardous Waste Regulation Program
Manifest Section
CN 421, Trenton, NJ 08625-0421

Form Approved OMB No. 2050-0039, Expires 9/30/95

Please type or print in block letters. (Form designed for use on elite (12-pitch) typewriter.)

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator's US EPA ID No.	Manifest Document No.	2. Page 1 of	Information in the shaded areas is not required by Federal law
3. Generator's Name and Mailing Address		NYC090413015		A. State Manifest Document Number NJA 2182352	
CITY OF NEW YORK DEPT OF GENERAL SERVICES 200 BROADWAY NEW YORK, NY 10007		(212) 317-1001		B. State Generator's ID (Gen. Site Address) 11 FRONT STREET	
5. Transporter 1 Company Name		5. US EPA ID Number		C. State Trans. ID-NJDEPE	
Frederick Chemical, Inc.		NJ0001200046		Decal No.	
7. Transporter 2 Company Name		7. US EPA ID Number		D. Transporter's Phone ()	
				E. State Trans. ID-NJDEPE	
9. Designated Facility Name and Site Address		9. US EPA ID Number		Decal No.	
CYCLE CHEM, INC. 217 SOUTH FIRST STREET ELIZABETH, NJ 07208		NJ0001200046		F. Transporter's Phone ()	
11. US DOT Description (Including Proper Shipping Name, Hazard Class or Division, ID Number and Packing Group)		12. Containers		13. Total Quantity	
a. HAZARDOUS WASTE LIQUID, NOS. 9, NA3077, PG1.1		No. Type		Unit Wt/Vol	
b.		c.		Waste No.	
c.		d.		e.	
d.		f.		g.	
J. Additional Descriptions for Materials Listed Above		K. Handling Codes for Wastes Listed Above			
a. WASTE WATER CONT. W/LEAD 100KLT		a. c.			
b.		b. d.			
15. Special Handling Instructions and Additional Information					
IN CASE OF EMERGENCY CALL CYCLE CHEM, INC. 908-355-5900 24 Hrs GENERATOR: 354304 CODE: DM001					
16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are truly and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations. If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment. OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.					
Printed/Typed Name		Signature		Month Day Year	
17. Transporter 1 Acknowledgement of Receipt of Materials		Signature		Month Day Year	
Printed/Typed Name		Signature		Month Day Year	
18. Transporter 2 Acknowledgement of Receipt of Materials		Signature		Month Day Year	
Printed/Typed Name		Signature		Month Day Year	
19. Discrepancy Indication Space					
20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19					
Printed/Typed Name		Signature		Month Day Year	



State of New Jersey
Department of Environmental Protection
Hazardous Waste Regulation Program
Manifest Section
CN 421, Trenton, NJ 08625-0421

Form Approved OMB No. 2050-0029 Env. 01-1-81

Please type or print in block letters. (Form designed for use on elite (12-pitch) typewriter.)

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator's US EPA ID No. NJ000043813	Manifest Document No. 00003	2. Page 1 of 1	Information in the shaded areas is not required by Federal law
Generator's Name and Mailing Address CITY OF NEW YORK DEPT OF GENERAL SERVICES 150 BROADWAY NEW YORK, NY (212) 277-1011				A. State Manifest Document Number NJA 2182349	
B. State Generator's ID (Gen. Site Address) 11 FRONT STREET NEW YORK, NY 10002				C. State Trans. ID-NJDEPE Decal No. 908 355-3800	
3. Transporter 1 Company Name CLEAN VENTURE, INC.				D. Transporter's Phone () 908 355-3800	
4. Transporter 1 US EPA ID Number NJ0000027193				E. State Trans. ID-NJDEPE Decal No. 908 355-3800	
5. Transporter 2 Company Name				F. Transporter's Phone ()	
6. Transporter 2 US EPA ID Number				G. State Facility's ID	
7. Designated Facility Name and Site Address CYCLE CHEM, INC. 217 SOUTH FIRST STREET ELIZABETH, NJ 07206032				H. Facility's Phone () (908) 355-3800	
8. Designated Facility US EPA ID Number NJ0002200046					
11. US DOT Description (including Proper Shipping Name, Hazard Class or Division, HM, ID Number and Packing Group)		12. Containers	Total Quantity	Unit Wt/Vol	Waste No
a. X HAZARDOUS WASTE LIQUID. NOS. 9, NA3077, PGIII (LEAD EPA 6006)		No. Type			6006
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State of New Jersey
Department of Environmental Protection
Hazardous Waste Regulation Program
Manifest Section

CN 421, Trenton, NJ 08625-0421

Please type or print in block letters. (Form designed for use on elite (12-pitch) typewriter.)

Form Approved OMB No. 2050-0030 Expires 12-30-96

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator's US EPA ID No	Manifest Document No.	2. Page 1 of	Information in the shaded areas is not required by Federal law
3. Generator's Name and Mailing Address CITY OF NEW YORK DEPT OF GENERAL SERVICES 280 BROADWAY NEW YORK, NY 10007		NY2000420015	000072	3. State Manifest Document Number NJA 2182348	
4. Transporter's Company Name WASTE MANAGEMENT, LTD DBA PHOENIX DISPOSAL MANAGEMENT, INC.		US EPA ID Number	B. State Generator's ID (Gen. Site Address) 11 FRONT STREET		
5. Designated Facility Name and Site Address S & W WASTE, INC. 115 JACOBUS AVENUE SOUTH PLAINFIELD, NJ 07080		US EPA ID Number NJ0401201105	C. State Trans. ID-NJDEPE 300-82 Decal No.		
6. US DOT Description (including Proper Shipping Name, Hazard Class or Division, ID Number and Packing Group) HM		Containers		D. Transporter's Phone () 718 522-2263	
a. 1 HQ, HAZARDOUS WASTE SOLID, NOS. 9, HA3077, PGIII (LEAD EPA CODE)		No.	Type	Total Quantity	Unit Wt/Vol
b.					
c.					
d.					
J. Additional Descriptions for Materials Listed Above S/S PAINT CHIPS, WALL BOARD, PLASTIC, DEBRIS, PPE		K. Handling Codes for Wastes Listed Above			
a.		a.			
b.		b.			
c.		c.			
d.		d.			
15. Special Handling Instructions and Additional Information IN CASE OF EMERGENCY CALL (718) 522-2263 24 Hrs					
16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this assignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations. If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.					
Printed/Typed Name T. ATTILIO		Signature		Month Day Year	
17. Transporter 1 Acknowledgement of Receipt of Materials					
Printed/Typed Name		Signature		Month Day Year	
18. Transporter 2 Acknowledgement of Receipt of Materials					
Printed/Typed Name		Signature		Month Day Year	
19. Discrepancy Indication Space					
20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.					
Printed/Typed Name		Signature		Month Day Year	



State of New Jersey
Department of Environmental Protection
Hazardous Waste Regulation Program
Manifest Section
CN 421, Trenton, NJ 08625-0421

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Form Approved OMB No. 2050-0039 Expires 9-30-96

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator's US EPA ID No.	Manifest Document No.	2. Page 1 of	Information in the shaded areas is not required by Federal law.
3. Generator's Name and Mailing Address		NYD090438815	00301	A. State Manifest Document Number NJA 2182352	
CITY OF NEW YORK DEPT OF GENERAL SERVICES 280 BROADWAY NEW YORK, NY (212) 277-1001		6. US EPA ID Number		B. State Generator's ID (Gen. Site Address) 11 FRONT STREET	
5. Transporter 1 Company Name		7. Transporter 2 Company Name		C. State Trans. ID-NJDEPE Decal No. X1443123	
8. US EPA ID Number		9. Designated Facility Name and Site Address		D. Transporter's Phone (908) 412-1101	
10. US EPA ID Number		11. US DOT Description (Including Proper Shipping Name, Hazard Class or Division, ID Number and Packing Group)		E. State Trans. ID-NJDEPE Decal No.	
CYCLE CHEM, INC. 217 SOUTH FIRST STREET ELIZABETH, NJ 07206		NJD007200046		F. Transporter's Phone ()	
12. Containers		13. Total Quantity		14. Unit Wt/Vol	
No. Type		Quantity		Waste No.	
a. HAZARDOUS WASTE LIQUID, NOS. 9, NA3077, PG111		1		G	
b.				D008	
c.					
d.					
J. Additional Descriptions for Materials Listed Above		K. Handling Codes for Wastes Listed Above			
a. WASTE WATER CONT. W/LEAD 100XLT		a.			
b.		c.			
15. Special Handling Instructions and Additional Information		b.			
IN CASE OF EMERGENCY CALL CYCLE CHEM, INC. 908-355-3800 24 Hrs		d.			
GENERATOR: 354304		CODE: DW001			
16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations.					
If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.					
Printed/Typed Name		Signature		Month Day Year	
17. Transporter 1 Acknowledgement of Receipt of Materials		Signature		Month Day Year	
Printed/Typed Name		Signature		Month Day Year	
18. Transporter 2 Acknowledgement of Receipt of Materials		Signature		Month Day Year	
Printed/Typed Name		Signature		Month Day Year	
19. Discrepancy Indication Space					
20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19					
Printed/Typed Name		Signature		Month Day Year	



State of New Jersey
Department of Environmental Protection
Hazardous Waste Regulation Program
Manifest Section
CN 421, Trenton, NJ 08625-0421

Please type or print in block letters. (Form designed for use on elite (12-pitch) typewriter.)

Form Approved. OMB No. 2050-0039. Expires 9-30-96

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator's US EPA ID No.	Manifest Document No.	2. Page 1 of 1	Information in the shaded areas is not required by Federal law.	
3. Generator's Name and Mailing Address CITY OF NEW YORK DEPT OF GENERAL SERVICES 250 BROADWAY NEW YORK, NY		4. Generator's Phone () (212) 277-1001		A. State Manifest Document Number NJA 2182349		
5. Transporter 1 Company Name CLEAN VENTURE, INC.		6. US EPA ID Number NJ A00027193		B. State Generator's ID (Gen. Site Address) 11 FRONT STREET S-5811		
7. Transporter 2 Company Name		8. US EPA ID Number		C. State Trans. ID-NJDEPE Decal No. 908 355-5800		
9. Designated Facility Name and Site Address CYCLE CHEM, INC. 217 SOUTH FIRST STREET ELIZABETH, NJ 07206032		10. US EPA ID Number NJ D001200046		D. Transporter's Phone () (908) 355-5800		
11. US DOT Description (Including Proper Shipping Name, Hazard Class or Division, ID Number and Packing Group) HAZARDOUS WASTE LIQUID, NOS, 9, H3077, P0111 (LEAD EPA D008)		12. Containers No. Type		13. Total Quantity 14. Unit Wt/Vol 15. Waste No.		
a.		b.		c.		
b.		d.		e.		
c.		f.		g.		
d.		h.		i.		
J. Additional Descriptions for Materials Listed Above WASTE WATER CONT. W/LEAD 100% LT		K. Handling Codes for Wastes Listed Above		a. c.		
b. d.		e. g.		f. h.		
15. Special Handling Instructions and Additional Information IN CASE OF EMERGENCY CALL CYCLE CHEM, INC. (908) 355-5800 24 Hrs GENERATOR: 354304 CODE: DWO01						
16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations. If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.						
Printed/Typed Name EMILIE ALBI		Signature <i>Emilie Albi</i>		Month Day Year / /		
17. Transporter 1 Acknowledgement of Receipt of Materials Printed/Typed Name		Signature <i>[Signature]</i>		Month Day Year / /		
18. Transporter 2 Acknowledgement of Receipt of Materials Printed/Typed Name		Signature <i>[Signature]</i>		Month Day Year / /		
19. Discrepancy Indication Space						
20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19. Printed/Typed Name		Signature <i>[Signature]</i>		Month Day Year / /		

CN 421, Trenton, NJ 08625-0421

Please type or print in block letters. (Form designed for use on elite (12-pitch) typewriter.)

Form Approved OMB No. 2050-0047 Exp. 9-30-95

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator's US EPA ID		Manifest Document No.		2. Page 1 of 1		Information in the shaded areas is not required by Federal law.	
3. Generator's Name and Mailing Address		HYDROCARBON		00002		A. State Manifest Document Number		NJ 2182348	
CITY OF NEW YORK DEPT OF GENERAL SERVICES 200 BROADWAY NEW YORK, NY		(212) 277-1001				B. State Generator's ID (Gen. Site Address)		11 FRONT STREET	
4. Transporter's Company Name		6. US EPA ID Number				C. State Trans. ID-NJDEPE		500-82	
7. Transporter's Company Name		8. US EPA ID Number				D. Transporter's Phone		718 522-2263	
9. Designated Facility Name and Site Address		10. US EPA ID Number				E. State Trans. ID-NJDEPE			
S & W WASTE, INC. 115 JACOBUS AVENUE SOUTH KENNY, NJ 07032		NJDEPE1271105				F. Transporter's Phone			
11. US DOT Description (Including Proper Shipping Name, Hazard Class or Division, ID Number and Packing Group)		12. Containers		13. Total Quantity		14. Unit (Wt/Vol)		15. Waste No.	
a. 1 BQ, HAZARDOUS WASTE SOLID, NOS. 9, RA3077, PGIII (LEAD EPA CODE)		X X X X X X X X X X		30		Y		0003	
b.									
c.									
d.									
J. Additional Descriptions for Materials Listed Above		K. Handling Codes for Wastes Listed Above							
a. S/E PAINT CHIPS, WALL BOARD, PLASTIC, DERRIS, PPE									
b.									
16. Special Handling Instructions and Additional Information									
IN CASE OF EMERGENCY CALL (718) 522-2263 24 Hrs.									
16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations.									
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Printed/Typed Name		Signature							
17. Transporter 1 Acknowledgement of Receipt of Materials		Printed/Typed Name		Signature		Date		Year	
18. Transporter 2 Acknowledgement of Receipt of Materials		Printed/Typed Name		Signature		Date		Year	
19. Discrepancy Indication Space									
20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in item 19.		Printed/Typed Name		Signature		Date		Year	

NJA 2182348



State of New Jersey
Department of Environmental Protection
Hazardous Waste Regulation Program
Manifest Section

CN 421, Trenton, NJ 08625-0421

HEADQUARTERS CONTACT:

Please type or print in block letters. (Form designed for use on elite (12-pitch) typewriter.)

Form Approved, OMB No. 2050-0039 Expires 9-30-96

UNIFORM HAZARDOUS
WASTE MANIFEST

1. Generator's US EPA ID No.

Manifest
Document No.

2. Page 1
of 1

Information in the shaded areas
is not required by Federal law.

3. Generator's Name and Mailing Address

CITY OF NEW YORK
DEPT OF GENERAL SERVICES
280 BROADWAY
NEW YORK, NY

(212) 277-1001

5. Transporter 1 Company Name

DICAP ASBESTOS LTD DBA PHOENIX DISP

6. US EPA ID Number

NYC0000551218

7. Transporter 2 Company Name

9. Designated Facility Name and Site Address

SAV WASTE, INC.
100 JACOBUS AVENUE
SOUTH BRANFORD NJ 07092

10. US EPA ID Number

A. State Manifest Document Number

NJA 2116847

B. State Generator's ID (Gen. Site Address)

11 FRONT STREET

C. State Trans. ID-NJDEPE

8-50082

Decal No.-

D. Transporter's Phone (718) 522-2263

E. State Trans. ID-NJDEPE

Decal No.-

F. Transporter's Phone ()

G. State Facility's ID

H. Facility's Phone (201) 344-4000

11. US DOT Description (Including Proper Shipping Name, Hazard Class or Division,
HM ID Number and Packing Group)

a. **X** **RQ. HAZARDOUS WASTE SOLID, NOS. 9, NA3077,
PG11 (LEAD EPA D008)**

12. Containers

No.

Type

13. Total
Quantity

14. Unit
Wt/Vol

15. Waste No.

X X 1 CN XX30 Y D008

J. Additional Descriptions for Materials Listed Above

S/E PAINT CHIPS, WALL BOARD, PLASTIC, DEBRIS, PPE

K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

IN CASE OF EMERGENCY CALL (718) 522-2263 24 Hrs

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations.

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Printed/Typed Name

INTIAZ ALI

Signature

Month Day Year

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19

Printed/Typed Name

Signature

Month Day Year

NJA 2116847